

# Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: Vocational Education Pilot Program for High Very Risk Youth- Footy
2. Date of Submission: 01/19/2016
3. House Member Sponsor(s): Jose Diaz

## 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No  
*If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d*
- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget  (Will equal non-vetoed amounts provided in Column A )	<b>INCREASED or NEW Recurring Requested</b>	<b>TOTAL Nonrecurring Requested</b>  (Nonrecurring is one time funding & must be re-requested every year)	<b>Total Funds Requested Over Base Funding</b>  (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:					0	800,000	800,000

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs

5. Requester:

- a. Name: John Kross
- b. Organization: Here?s Help, Inc.
- c. Email: Kross@HeresHelpInc.com
- d. Phone #: (305)685-8201

6. Organization or Name of Entity Receiving Funds:

- a. Name: Here?s Help, Inc.
- b. County (County where funds are to be expended) Miami-Dade
- c. Service Area (Counties being served by the service(s) provided with funding) Statewide

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project?s intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

education (HS Diploma), vocational training, counseling, and a structured living situation that will prevent entry into higher levels of care or future incarceration of these youth. The project will be goal oriented and evaluated to monitor the impact on the clients. A wide array of training and services will be provided that will include vocational training in the following in Computer Technology; Music and Visual Arts; Culinary Arts Program; and Horticulture. A wide array of evidence based clinical interventions will also be provided with a focus on wellness, self-esteem, self-guidance, independence and acknowledging the difference between right and wrong. The clients of this innovative program will be drawn from the State Departments of Corrections, Probation and Parole, Drug Court, and the Department of Children and Families, including many with child welfare involvement. Substance abuse and mental health issues will be addressed through a comprehensive treatment program that includes case management, individual and group therapy, family counseling, psycho-educational programming, full-time accredited schooling, alternative therapies (music and visual arts), job-readiness assistance and vocational placement, medical and psychological care, relapse prevention, and aftercare. It will address mental health issues, substance use, vocational training, and education for very high risk youth. Referrals (90%) from Drug Court, DJJ. The request is for \$800,000.

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

- Federal: 0
- State: 0 (Excluding the requested Total Amount in #4d, Column G)
- Local: 0
- Other: 36,000

9. Is this a multi-year project requiring funding from the state for more than one year?

Yes