

# Appropriations Project Request - Fiscal Year 2017-18

## For projects meeting the Definition of House Rule 5.14

1. Title of Project: Florida Center for Advanced Aero Propulsion at FSU

2. Date of Submission: 01/27/2017

3. House Member Sponsor: Joe Gruters

Members Copied:

### 4. DETAILS OF AMOUNT REQUESTED:

- Has funding been provided in a previous state budget for this activity? Yes  
*If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d*
- What is the most recent fiscal year the project was funded? > 5 years
- Were the funds provided in the most recent fiscal year subsequently vetoed?
- 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 2016-17 <i>(If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2017-18 <i>(Requests for additional RECURRING funds are prohibited. Any additional Nonrecurring funding requested to supplement recurring funds in the base will result in the base recurring amount being converted to Nonrecurring .)</i>		
	Column:	A	B	C	D	E
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	<b>Additional Nonrecurring Request</b>	<b>TOTAL Nonrecurring Request</b> <i>(Will equal the amount from the Recurring base in Column D to be CONVERTED to Nonrecurring plus the Additional Nonrecurring Request in Column E. These funds will be appropriated non-recurring if funded in the House Budget or the Final Conference Report on the budget.)</i>
Input Amounts:					4,800,000	4,800,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2017-18? No

5a. If yes, which state agency?

5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? For example, if the requested issue pertains to services provided to inmates at correctional facilities, the Department of Corrections would be the most appropriate state agency. Board of Governors

6. Requester:

- a. Name: Louis Cattafesta
- b. Organization: FCAAP
- c. Email: lcattafesta@fsu.edu
- d. Phone #: (850)645-0109

7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):

- a. Name: William Oates
- b. Organization: FCAAP
- c. Email: woates@eng.famu.fsu.edu
- d. Phone #: (850)645-0139

8. If there is a registered lobbyist, fill out the lobbyist information below.

- a. Name: Kathy Mears
- b. Firm: Florida State University
- c. Email: kmears@fsu.edu
- d. Phone #: (850)251-4466

9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):

- a. Name: FCAAP
- b. County (County where funds are to be expended): Leon
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government

- University or College
- Other (Please describe)

11. What is the specific purpose or goal that will be achieved by the funds being requested?

To support the operations and expansion of the State Center of Excellence "Florida Center for Advanced Aero Propulsion" (FCAAP) that focuses on dramatically expanding cutting edge education, training and technology development in Aerospace, Aviation and related Industry for Florida, thereby enhancing the state's leadership role in these areas that are critical to Florida's economy and competitiveness - nationally and globally.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. F) Enter ?0? if request is zero for the category
Administrative Costs:		
<input type="checkbox"/> a. Executive Director/Project Head Salary and Benefits		
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Support for staff and OPS	250,000
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	Database server for reporting, office supplies	50,000
<input type="checkbox"/> d. Consultants/Contracted Services/Study		
Operational Costs:		
<input checked="" type="checkbox"/> e. Salaries and Benefits	Graduate student fellowships, post doc support	1,500,000
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Expendable wind tunnel laboratory supplies, Quantum computing time	750,000
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Support for visiting scholar research, development, and industrial tech transfer	750,000

Fixed Capital Construction/Major Renovation:		
<input checked="" type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering	Thermal matrix & nozzle for polysonic wind tunnel, computational facility enhancements	1,500,000
TOTAL		4,800,000

13. For the Fixed Capital Costs requested with this issue, what type of ownership will the facility be under when complete? (In Question 12, if ?h. Fixed Capital Outlay? was not selected, question 13 is not applicable)

For Profit

Non Profit 501(c) (3)

Non Profit 501(c) (4)

Local Government (e.g., police, fire or local government buildings, local roads, etc.)

State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)

Other (Please describe)

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

We have documented support for FCAAP through letters written by various stakeholders in support for FCAAP initiatives in the past. In addition, we have also received funds from aerospace companies in FL.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

No

17. Will the requested funds be used directly for services to citizens?

Yes

17a. Describe the target population to be served. Select all that apply to the target population:

- Elderly persons
- Persons with poor mental health
- Persons with poor physical health
- Jobless persons
- Economically disadvantaged persons
- At-risk youth
- Homeless
- Developmentally disabled
- Physically disabled
- Drug users (in health services)
- Preschool students
- Grade school students
- High school students
- University/college students
- Currently or formerly incarcerated persons
- Drug offenders (in criminal Justice)
- Victims of crime
- Other (Please describe): aerospace industry professionals and civilian researchers at military facilities

17b. How many in the target population are expected to be served?

- < 25
- 25-50
- 51-100
- 101-200
- 201-400
- 401-800
- >800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select all that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input type="checkbox"/> Improve physical health		
<input type="checkbox"/> Improve mental health		

<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input checked="" type="checkbox"/> Improve quality of education	More graduating engineers in FL	Number of M.S. and Ph.D. degrees
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)		
<input type="checkbox"/> Improve transportation conditions		
<input checked="" type="checkbox"/> Increase or improve economic activity	Increase in quality and number of high-paying jobs in aerospace field. Develop Technology that mitigates adverse effect of aviation, thus allowing growth of air transport, state-wide and nationally	Number of jobs retained in FL or added
<input checked="" type="checkbox"/> Increase tourism	see above	no answer
<input checked="" type="checkbox"/> Create specific immediate job opportunities	Increase the number of engineers and scientists employed at FCAAP and its partners	Number of people hired or retained
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input type="checkbox"/> Reduce substance abuse		
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		

<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input checked="" type="checkbox"/> Other (Please describe): Enhanced national reputation of FL universities/higher ed. in engineering/ science/tech fields	National Ranking of engineering programs at FCAAP institutions	Monitor rankings of relevant graduate programs at FCAAP institutions.

19. Provide the total cost of the project for FY 2017-18 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total (Automatically Calculates)	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	4,800,000	53.8%	N/A
2. Federal:	2,100,000	23.5%	Yes
3. State: (Excluding the requested Total Amount in #4d, Column F)	1,700,000	19.0%	Yes
4. Local:	0	0.0%	No
5. Other:	330,000	3.7%	Yes
<b>TOTAL</b>	<b>8,930,000</b>	<b>100%</b>	

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

No