Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: <u>Restoring Our Youth</u>
- 2. Date of Submission: <u>02/06/2017</u>
- 3. House Member Sponsor: <u>Roy Hardemon</u> Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? <u>No</u> 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?
- 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 2016-17 (If appropriated in 2016-17 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2017-18 (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.)		
Column:	А	В	С	D	E	F
Funds	Prior Year		Total Funds	Recurring Base	Additional	TOTAL Nonrecurring Request
Description:	Recurring	Prior Year	Appropriated	Budget	Nonrecurring	(Will equal the amount from the Recurring base in
	Funds	Nonrecurring		(Will equal non-	Request	Column D to be CONVERTED to Nonrecurring plus
		Funds	(Recurring plus	vetoed amounts		the Additional Nonrecurring Request in Column E.
			Nonrecurring:	provided in Column		These funds will be appropriated non-recurring if
			column A + column	A)		funded in the House Budget or the Final Conference
			B)			Report on the budget.)
Input					200,000	200,000
Amounts:						

5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2017-18? No5a. 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. Department of Education

6. Requester:

- a. Name: Alexis Bannerman
- b. Organization: Queens N Tiara's Inc.
- c. Email: queens.n.tiaras@gmail.com
- d. Phone #: (305)915-9346

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

- a. Name: <u>Alexis Bannerman</u>
- b. Organization: Queens N Tiara's Inc.
- c. Email: queens.n.tiaras@gmail.com
- d. Phone #: (305)915-9346
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: None
 - b. Firm: <u>None</u>
 - c. Email:
 - d. Phone #:

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

- a. Name: Queens N Tiara's 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): Miami-Dade

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

O For Profit

• Non Profit 501(c) (3)

O Non Profit 501(c) (4)

O Local Government

O University or College O Other (Please describe)

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

Our goal is to ensure that the youth of Miami-Dade County are prepared with the knowledge, experience and skills that will allow them to flourish in Main Stream America while compiling in them knowledge of their self-worth, retained individual independence as well as increased respect of others.

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:		
☑a. Executive Director/Project Head Salary and Benefits	The funds will help pay for the salaries of the Director and Program Operations Manager who will be the supervisors of the entire Restoring Our Youth Project.	12,000
☑b. Other Salary and Benefits	The funds will help cover the salaries of all administrative staff.	3,000
⊠c. Expense/Equipment/Travel/Supplies/Other	The funds will be allocated to purchase equipment including, but not limited to, computers, printers, and copy machines, and utilities, and office supplies, maintenance and others.	4,000
☑d. Consultants/Contracted Services/Study	The funds will be used and allocated for consultants fees, legal services, independent accountants.	1,000
Operational Costs:		

☑e. Salaries and Benefits	The funds will be allocated for the salaries for trainers, tutors, and mentors.	32,500
Øf. Expenses/Equipment/Travel/Supplies/Other	The funds will be used for the purchase of furniture, training materials, and office supplies.	32,500
☑g. Consultants/Contracted Services/Study	The funds will be used for marketing specialists, recruiters, and a recreational coach.	65,000
Fixed Capital Construction/Major Renovation:		
☑h. Construction/Renovation/Land/Planning Engineering	The funds will be used to purchase a transportation van and a facility center.	50,000
TOTAL		200,000

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)

OFor Profit

⊙Non Profit 501(c) (3)

ONon Profit 501(c) (4)

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

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

etc.)

OOther (Please describe)

14. Is the project request an information technology project?

<u>No</u>

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 letters of support from the community.

- 16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served? <u>Yes</u>
 - 16a. Please Describe:

Miami-Dade County Planning Department made a study along with the University of Miami.

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

<u>Yes</u>

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)
- 17b. How many in the target population are expected to be served? O< 25 O25-50

O51-100	
O101-200	
O201-400	
O401-800	
⊙>800	

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

what benefits of outcomes will be realized by the experior turns 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		
⊠Improve	ohysical health	Provide healthy foods to reduce obesity and physical activity during session.	To provide formal physical health management policies where we can measure the weight of the kids before and after.		
⊠Improve	nental health	Increase the reading and math level for the kids which will in turn boost their self-esteem and reduce their anxiety.	Stress reduction by developing formal stress intervention/management policies that contribute to the quality of life.		
⊠Enrich cu	Itural experience	Miami-Dade County is a culturally diverse community. Restoring Our Youth Project will connect traditional culture with modern values so that the kids can develop interaction among each other without regard to race or religion. We will have cultural activities.	Monthly math and reading contest, occasional fashion shows and concerts.		
	agricultural production/promotion/education				
⊠Improve	quality of education	We will provide fun learning activities to increase the level of quality of education, innovation, critical; and creative thinking skills, technology based education.	We will determine our success by measuring the grades of our kids from their respective schools before and after their participation in the Restoring Our Youth Project.		

☑Enhance/preserve/improve environmental or fish and wildlife quality	We will have green activity. We will use recycling materials, and teach how to recycle at home.	The reduction of trash in the work space area and the kids attitude toward recycling product.
☑Protect the general public from harm (environmental, criminal, etc.)	By providing good education for kids it will in turn serve them as a solid foundation to become better teen ager and adult to live, work and play in a better community safely.	The reduction of juvenile incarceration rate from the area and Police crime reports will document the reduction in crime.
Improve transportation conditions		
□Increase or improve economic activity		
□Increase tourism		
Create specific immediate job opportunities		
Enhance specific individual?s economic self sufficiency		
□Reduce recidivism		
□Reduce substance abuse		
☑Divert from Criminal/Juvenile justice system	Divert youth from criminal justice system, create program showcase the importance of citizenship and the intern summer jobs will directly reduce the chances of crimes by our youth.	Criminal Justice system will report on the decrease of juvenile incarceration.
Improve wastewater management		
Improve stormwater management		
□Improve groundwater quality		
Improve drinking water quality		

□Improve surface water quality	
□Other (Please describe):	

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:	200,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	200,000	100%	

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

<u>No</u>