## **Appropriations Project Request - Fiscal Year 2017-18**

For projects meeting the Definition of House Rule 5.14

1. Title of Project: National Cyber Partnership - Cyber Training for Veterans

2. Date of Submission: 02/07/2017

3. House Member Sponsor: Chris Latvala

Members Copied:

## 4. DETAILS OF AMOUNT REQUESTED:

- a. 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
- b. What is the most recent fiscal year the project was funded? 2016-17
- 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 |                  | Develop New Funds Request |   |              |  |
|--------------|---|------------------|---------------------------|---|--------------|--|
|              | for FY 2016-17                                  |                  |                           | for FY 2017-18  |              |  |
|              | (If appropriated in 2016-17 enter the           |                  |                           | (Requests for additional RECURRING funds are prohibited. Any additional       |              |  |
|              | approp  | riated amount, e | even if vetoed.)          | Nonrecurring funding requested to supplement recurring funds in the base will |              |  |
|              |   |                  |                           | result in the base recurring amount being converted to Nonrecurring .)        |              |  |
| Column:      | Α   | 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        |   | 450,000          | 450,000                   |   | 749,500      | 749,500  |
| Amounts:     |   |                  |                           |   |              |  |

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. Department of Economic Opportunity

- 6. Requester:
  - a. Name: Michael Shapiro
  - b. Organization: <u>National Cyber Partnership</u> c. Email: <u>mfshapiro@national-cyber.org</u>
  - d. Phone #: (813)922-3600
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
  - a. Name: Michael Shapiro
  - b. Organization: <u>National Cyber Partnership</u> c. Email: mfshapiro@national-cyber.org
  - d. Phone #: (813)922-3600
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
  - a. Name: Slater Bayliss
  - b. Firm: Advocacy Group at Cardenas Partners
  - c. Email: <a href="mailto:swb@cardenaspartners.com">swb@cardenaspartners.com</a>
  - d. Phone #: (850)222-8900
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
  - a. Name: National Cyber Partnership
  - b. County (County where funds are to be expended): Hernando, Hillsborough, Pasco, Pinellas, Polk
  - c. Service Area (Counties being served by the service(s) provided with funding): Hernando, Pasco, Pinellas, Polk
- 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

| 0 | University or College   |
|---|-------------------------|
| 0 | Other (Please describe) |

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

Undertake a pilot program to develop and introduce standalone, fast-track, competency-based cyber classes, including preparation for industry certification exams. Because the cyber field evolves so quickly, updating every 6 months on the average, college and university programs have a hard time keeping pace, especially taking into account their required curriculum accreditation reviews. Despite the growth of cybersecurity programs at colleges and universities, the pipeline of qualified job candi

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

| Spending Category                                       | Description   | Nonrecurring<br>(Should equal 4d, Col. F)<br>Enter ?0? if request is zero for the<br>category |
|---|---|---|
| Administrative Costs:                                   |   |   |
| ☐a. Executive Director/Project Head Salary and Benefits |   |   |
| □b. Other Salary and Benefits                           |   |   |
| □c. Expense/Equipment/Travel/Supplies/Other             |   |   |
| □d. Consultants/Contracted Services/Study               |   |   |
| Operational Costs:                                      |   |   |
| ☑e. Salaries and Benefits                               | curriculum & course planning & development, quality review  | 200,000   |
| ☑f. Expenses/Equipment/Travel/Supplies/Other            | classroom rental, cloud services, marketing materials   | 146,000   |
| ☑g. Consultants/Contracted Services/Study               | curriculum & course planning,<br>development, delivery &<br>administration, portal development &<br>management, systems engineering | 403,500   |

|      |   | and provisioning, operating              |  |
|------|---|--|--|
|      |   | agreements and legal review              |  |
|      | Fixed Capital Construction/Major Renovation:  |  |  |
|      |   |  |  |
|      | □h. Construction/Renovation/Land/Planning Engineering   |  |  |
|      | TOTAL   |  | 749,500                                  |
|      |   |  |  |
| Fixe | For the Fixed Capital Costs requested with this issue, what ty<br>d Capital Outlay? was not selected, question 13 is not applica<br>N/A   |  | r when complete? (In Question 12, if ?h. |
|      | s the project request an information technology project?  No  |  |  |
| orga | is there any documented show of support for the requested prizational backing, or other expressions of support?  Yes  | project in the community including publi | c hearings, letters of support, major    |
|      | 15a. Please Describe:<br>Letters of supports from students and others   |  |  |
|      | Has the need for the funds been documented by a study, con<br><u>No</u>   | npleted by an independent 3rd party, for | the area to be served?                   |
|      | Will the requested funds be used directly for services to citize Yes  | ens?                                     |  |
|      | 17a. Describe the target population to be served. Select all t☐Elderly persons☐Persons with poor mental health☐Persons with poor physical health☐Jobless persons☐Economically disadvantaged persons☐At-risk youth | that apply to the target population:     |  |
|      |   | Dogo 4 of 7                              |  |
|      |   |  |  |

| □ 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): veterans |  |
|--|--|
| 17b. How many in the target population are expected to be served?  O< 25  O25-50  ©51-100  O101-200  O201-400  O401-800  O>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                      |
|--|--|---|
| □Improve physical health                             |  |   |
| □Improve mental health                               |  |   |
| □Enrich cultural experience                          |  |   |
| □Improve agricultural production/promotion/education |  |   |
| ☑Improve quality of education                        | students able to acquire industry certification      | ratio of enrolled students earning one or more industry certifications. |

| □Enhance/preserve/improve environmental or fish and wildlife quality  |  |  |
|---|--|--|
| □Protect the general public from harm (environmental, criminal, etc.) |  |  |
| □Improve transportation conditions                                    |  |  |
| ☑Increase or improve economic activity                                | student graduating with cyber skills qualified for unfilled jobs | number of enrolled students who complete their studies and move on to cyber studies at colleges and universities or get jobs |
| □Increase tourism   |  |  |
| □Create specific immediate job opportunities                          |  |  |
| ☑Enhance specific individual?s economic self sufficiency              | graduating students earn industry certifications                 | number of enrolled students who complete their studies and move on to cyber studies at colleges and universities or get jo   |
| □Reduce recidivism  |  |  |
| □Reduce substance abuse   |  |  |
| □Divert from Criminal/Juvenile justice system                         |  |  |
| □Improve wastewater management  |  |  |
| □Improve stormwater management  |  |  |
| □Improve groundwater quality  |  |  |
| □Improve drinking water quality                                       |  |  |
| □Improve surface water quality  |  |  |

| ☑Other (Please describe): Qualify transitioning military, | graduates with cyber skills and | number of enrolled students who        |
|---|---------------------------------|--|
| veterans and displaced workers to                         | qualifications                  | complete their studies and get jobs or |
|   |                                 | move on to cyber studies at colleges   |
|   |                                 | and universities                       |
|   |                                 |  |

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<br>(Automatically Calculates) | Are the other sources of funds guaranteed in writing? |
|---|---------|--|---|
| Amount Requested from the State in this Appropriations     Project Request: | 749,500 | 88.2%  | 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:   | 100,000 | 11.8%  | No  |
| TOTAL   | 849,500 | 100%   |   |

20. Is this a multi-year project requiring funding from the state for more than one year?  $\underline{\text{No}}$