Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

Title of Project: <u>City Year Florida</u>
 Date of Submission: <u>02/07/2017</u>
 House Member Sponsor: <u>Janet Cruz</u>

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? Yes
- 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 fun | ding requested | sted 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 Colum | | the Additional Nonrecurring Request in Column E. | | |
| | | | Nonrecurring: | provided in Column These funds will be appropriated non-recurring in | | 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 | | 500,000 | 500,000 | | 1,032,500 | 1,032,500 | | |
| 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 Education

- 6. Requester:
 - a. Name: <u>Jay Thompson</u>b. Organization: City Year
 - c. Email: jthompson@cityyear.org
 - d. Phone #: (617)927-2675
- 7. Contact for questions about specific technical or financial details about the project (Please retype if same as Requester):
 - a. Name: <u>Jay Thompson</u>b. Organization: City Year
 - c. Email: jthompson@cityyear.org
 - d. Phone #: (617)927-2675
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: <u>Stephanie Zauder</u>b. Firm: Ballard Partners
 - c. Email: stephanie@ballardfl.com
 - d. Phone #: (954)817-8007
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: City Year Florida
 - b. County (County where funds are to be expended): Duval, Miami-Dade, Orange
 - c. Service Area (Counties being served by the service(s) provided with funding): <u>Duval, Miami-Dade, Orange</u>
- 10. What type of organization is the entity that will receive the funds? (Select one)
 - O For Profit

 - 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?

City Year hires and trains diverse teams of young adults who commit to a year of full-time service in low-income schools where they work as tutors, mentors and role models for students in grades 3-9. For the 2016-2017 school year there are 375 City Year AmeriCorps members serving over 35,000 at-risk students across 36 schools in Florida. State funding would add capacity that would allow City Year to reach more students and provide even more impactful targeted supports in math, ELA, and behavior

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 | | |
| □b. Other Salary and Benefits | | |
| □c. Expense/Equipment/Travel/Supplies/Other | | |
| □d. Consultants/Contracted Services/Study | | |
| Operational Costs: | | |
| ☑e. Salaries and Benefits | Appropriations funding would directly support the projected 383 City Year | 1,032,500 |
| | AmeriCorps members who will be | |
| | serving over 40,000 students across | |
| | the state during the 2017-2018 year, | |
| | as well as 30 school-based City Year Impact Managers who add significant | |
| | capacity to the schools and districts | |
| | we partner with in three high needs | |

| | | Florida districts. | | | |
|---|--|--|---------------------------------------|--|--|
| | ☐f. Expenses/Equipment/Travel/Supplies/Other | | | | |
| | ☐g. Consultants/Contracted Services/Study | | | | |
| | Fixed Capital Construction/Major Renovation: | | | | |
| | □h. Construction/Renovation/Land/Planning Engineering | | | | |
| | TOTAL | | 1,032,500 | | |
| 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) N/A | | | | | |
| 14. | 14. Is the project request an information technology project? <u>No</u> | | | | |
| | Is there any documented show of support for the requested propertional backing, or other expressions of support? Yes | project in the community including publi | c hearings, letters of support, major | | |
| | 15a. Please Describe: Letters of Support and Major Organizational Backing | | | | |
| 16. | 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. | 17. Will the requested funds be used directly for services to citizens? Yes | | | | |
| | 17a. Describe the target population to be served. Select all t☐Elderly persons☐Persons with poor mental health☐Persons with poor physical health | that apply to the target population: | | | |
| | □ Jobless persons | | | | |
| | | Page 4 of 8 | | | |

| | ☑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 | Served. | |
| | O25-50 | | |
| | O51-100 | | |
| | O101-200 | | |
| | O201-400 | | |
| | O401-800 | | |
| | © >800 | | |
| 10 | What benefits or outcomes will be realized by the expenditu | ro of funds requested? (Salost all that an | nline |
| 10. | Benefit or Outcome | Provide a specific measure of the benefit | Describe the method for measuring level |
| | Zenen er euteeme | or outcome | of benefit |
| | □Improve physical health | | |
| | Character as a stat to a state | | |
| | □Improve mental health | | |

□Enrich cultural experience

□Improve agricultural production/promotion/education

| ☑Improve quality of education | According to a Policy Studies Associates study, schools that partner with City Year are up to 2-3 times more likely to improve on state assessments in math and English. These schools gained the equivalent of approximately one month of additional math and English learning, compared to schools that did not partner with City Year. Students working with City Year on literacy or math demonstrated a higher growth rate than the national average for students at their initial proficiency level | Impact Data is reviewed continually throughout the year Enrollment and completion data are reviewed weekly and shared with school partners Student outcome data is reviewed quarterly. |
|---|---|--|
| □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 | | |
| □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 | 61% of students who complete attendance coaching maintained | Impact Data is reviewed continually throughout the year Enrollment and |

| | above 90% attendance 71% of students in Jacksonville who participated in behavior coaching either decreased in suspensions or maintained zero 82% of students who participated in behavior coaching in Miami or Orlando decreased suspensions or maintained zero. | completion data are reviewed weekly and shared with school partners Student outcome data is reviewed quarterly. |
|---------------------------------|---|---|
| □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? |
|---|-----------|---|---|
| Amount Requested from the State in this Appropriations Project Request: | 1,032,500 | 6.5% | N/A |
| 2. Federal: | 3,800,000 | 24.0% | Yes |
| 3. State: (Excluding the requested Total Amount in #4d, Column F) | 0 | 0.0% | No |
| 4. Local: | 4,000,000 | 25.3% | Yes |
| 5. Other: | 7,000,000 | 44.2% | Yes |

| TOTAL | 15,832,500 | 100% | | | |
|---|----------------------------|-------|--|--|--|
| 1017/12 | | 10070 | | | |
| Is this a multi-year project requiring funding from the state for more than one year? Yes | | | | | |
| 20a. How much state funding would be requested after 2017 O<1M | -18 over the next 5 years? | | | | |
| O1-3M | | | | | |
| ⊙>3-10M | | | | | |
| O>10M | | | | | |
| 20b. How many additional years of state support do you expect to need for this project? O1 year O2 years O3 years O4 years ⊙>= 5 years | | | | | |
| 20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select ?ongoing activity?. O<1M | | | | | |

O1-2M O>2-3M O>3-10M O>10M

20.