Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Security Funding for Jewish Day Schools

2. Date of Submission: <u>11/14/2017</u>3. House Member Sponsor: Randy Fine

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, Col. E

- b. What is the most recent fiscal year the project was funded? 2017-18
- 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:

FY:	(If app	Year Appropriat for FY 2017- propriated in 2013 priated amount, e	7-18 enter the	Develop New Funds Request for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)			
Column:	Α	В	С	D	E	F	
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)	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds (Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)	
Input Amounts:		654,491	654,491		2,000,000	2,000,000	

- 5. Are funds for this issue requested in a state agency?s Legislative Budget Request submitted for FY 2018-19? 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? Department of Education
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? $\underline{\text{No}}$
 - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.

Corrective action pursuant to contract

6. Requester: a. Name: Mimi Jankovitz b. Organization: Orthodox Union c. Email: mimij@ou.org d. Phone #: (213)304-5038
 7. Contact for questions about specific technical or financial details about the project: a. Name: Mimi Jankovitz b. Organization: Orthodox Union c. Email: mimij@ou.org d. Phone #: (213)304-5038
 8. Is there a registered lobbyist working to secure funding for this project? a. Name: Amy Bisceglia b. Firm: The Rubin Group c. Email: amy@rubingroup.com d. Phone #: (850)681-9111
 9. Organization or Name of entity receiving funds: a. Name: <u>Yad David</u> b. County (County where funds are to be expended): <u>Statewide</u> c. Service Area (Counties being served by the service(s) provided with funding): <u>Statewide</u>
 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?

Provide much needed security and counter-terrorism upgrades at Florida Jewish day schools. Funds may only be used by organizations who have legitimate concerns from groups on the State Departments Terrorist watch list.

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

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter ?0? if request is zero for the category
Administrative Costs:		
☐a. Executive Director/Project Head Salary and Benefits		
☑b. Other Salary and Benefits	Administrative Costs	75,000
□c. Expense/Equipment/Travel/Supplies/Other		
□d. Consultants/Contracted Services/Study		
Operational Costs:		
□e. Salaries and Benefits		
☑f. Expenses/Equipment/Travel/Supplies/Other	Target hardening building and equipment upgrades such as fences, vehicle access control, video recording system, electronic access control to the building(s), ballistic glass, and alarm & communication systems	1,925,000
☐g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
□h. Construction/Renovation/Land/Planning Engineering		

TOTAL	2,000,000
13. For the Fixed Capital Costs requested with this issue (In Queswill the facility be under when complete? (Select one correct opt N/A	stion 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership tion)
14. Is the project request an information technology project? No	
15. Is there any documented show of support for the requested organizational backing, or other expressions of support? Yes	project in the community including public hearings, letters of support, major
15a. Please Describe: Letters of support from Florida Jewish Day Schools, sup	port from Teach New York and New Jersey, who have implemented similar funding
16. Has the need for the funds been documented by a study, cor <u>Yes</u>	mpleted by an independent 3rd party, for the area to be served?
16a. Please Describe: Surveys have been conducted by law enforcement show	wcasing the security needs of these schools
17. Will the requested funds be used directly for services to citizen Yes	ens?
17a. What are the activities and services that will be provide Facilities will be made safer through the use of fencing,	d to meet the purpose of the funds? CCTV sysytems and upgrades, bulletproof glass and screening systems
17b. Describe the direct services to be provided to the citize A safe environment to meet and learn	ns by the funding requested.
17c. Describe the target population to be served (i.e., "the m Select all that apply to the target population: □Elderly persons □Persons with poor mental health □Persons with poor physical health	najority of the funds requested will serve these target populations or groups.").

□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	
☐General (The majority of the funds will benefit no specific grou	p)
□Other (Please describe)	
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17d. How many in the target population are expected to be served	1?
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 each Benefit/Outcome 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	The safety of the number of students served	10,000+ students and faculty
□Improve mental health		

□Enrich cultural experience		
□Improve agricultural production/promotion/education		
☑Improve quality of education	The safety of the number of students and faculty served	School safety for the 10,000+ students and faculty
□Enhance/preserve/improve environmental or fish and wildlife quality		
□Protect the general public from harm (environmental, criminal, etc.)		
☑Improve transportation conditions	The safety of the number of students and faculty served	Hardening of the target drop off locations will provide a safe access to school for 10,000 students
□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		
□Improve wastewater management		
□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		

□Improve surface water quality		
□Other (Please describe):		
Drovide the total cost of the project for EV 2019 10 from all s	ourses of funding (Enter 202 if amount is	zaro).

19. Provide the total cost of the project for FY 2018-19 from all sources of funding (Enter ?0? if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
Amount Requested from the State in this Appropriations Project Request:	2,000,000	100.0%	N/A
2. Federal:	0	0.0%	No
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	2,000,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year? <u>Yes</u>

20a.	How much	state fundir	ig would	be requested	l after 201	L8-19 d	over the r	າext 5 າ	years?
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O<1M

⊙1-3M

O>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?.

Ongoing activity? no total cost

O<1M

O1-3M

O>3-10M

O>10M