Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: Florida Gulf Coast University Honors College
- 2. Date of Submission: <u>01/24/2017</u>
- 3. House Member Sponsor: <u>Matt Caldwell</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					1,600,000	1,600,000
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. Board of Governors

- 6. Requester:
 - a. Name: Wilson Bradshaw
 - b. Organization: Florida Gulf Coast University
 - c. Email: bradshaw@fgcu.edu
 - d. Phone #: <u>(239)590-1051</u>

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

- a. Name: <u>Jennifer Goen</u>
- b. Organization: Florida Gulf Coast University
- c. Email: jgoen@fgcu.edu
- d. Phone #: (239)823-5718
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Charlie Dudley
 - b. Firm: Florida Partners, LLC
 - c. Email: cdudley@flapartners.com
 - d. Phone #: <u>(850)681-0024</u>

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

- a. Name: Florida Gulf Coast University
- b. County (County where funds are to be expended): Lee
- c. Service Area (Counties being served by the service(s) provided with funding): Charlotte, Collier, Glades, Hendry, Lee

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

O For Profit

O Non Profit 501(c) (3)

- O Non Profit 501(c) (4)
- O Local Government

University or CollegeO Other (Please describe)

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

The Florida Gulf Coast University (FGCU) Strategic Plan for 2016-2021 and the 2016 Work Plan are built on key pillars which provide the foundation to reach for greater excellence, including successful four-year graduation rates and ensuring students achieve a high paying job. One of the pillars is Academic Excellence, which includes the transition of FGCU?s current Honors Program to a full Honors College. This request will improve retention and 4 year graduation rate.

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	Faculty and Support Staff	1,085,185
☑f. Expenses/Equipment/Travel/Supplies/Other	Student and Faculty Travel, Equipment	514,815
□g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
□h. Construction/Renovation/Land/Planning Engineering		

TOTAL	1,600,000

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)

<u>N/A</u>

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?

<u>Yes</u>

15a. Please Describe:

The request was presented at local delegation meetings. Additionally, support letters have been provided in the past and will be provided again this year from industry representatives and local advocates.

- 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:

?Differences Between an Honors Program and Honors College: A Case Study?. Discusses the benefits of moving towards an Honors College. http://digitalcommons.unl.edu/cgi/viewcontent.cgi?article=1133&context=nchcjournal

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)
- 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)

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Benefit or Outcome	Provide a specific measure of the benefit	Describe the method for measuring level
	or outcome	of benefit
	or outcome	of benefit
□Improve physical health		
□Improve mental health		
☑Enrich cultural experience	Study abroad opportunities	# of honors students in Study Abroad
·	, , , , , , , , , , , , , , , , , , , ,	5
Improve agricultural production/promotion/education		
Mimprove quality of advection	Created honora continue	Llanara CDA va regular student hadv
☑Improve quality of education	Special honors sections	Honors GPA vs regular student body
Enhance/preserve/improve environmental or fish and		
	1	1

Internship & Co-Op education	# of students participating
Post-grad employment	% of grads working vs gen stud pop
Graduate without debt	% of with no student debt
	Post-grad employment

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	1,600,000	100.0%	N/A

Project Request:			
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	1,600,000	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 funding would be requested after 2017-18 over the next 5 years?

O<1M

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

 \odot >= 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 O1-2M

O>2-3M

O>3-10M

O>10M