Appropriations Project Request - Fiscal Year 2017-18

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: FIU UP: LIFT (University Paradigm: Learn, Interact, Facilitate, Transform)
- 2. Date of Submission: <u>01/31/2017</u>
- 3. House Member Sponsor: <u>Manny Diaz</u> Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? <u>Yes</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? $\underline{2016\text{-}17}$
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? $\underline{\mbox{No}}$
- 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 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		3,000,000	3,000,000		4,995,314	4,995,314
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: Kenneth G. Furton
 - b. Organization: Florida International University Provost and Executive VP
 - c. Email: furtonk@fiu.edu
 - d. Phone #: (305)348-2151

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

- a. Name: Michelle Palacio
- b. Organization: Florida International Univeristy
- c. Email: palaciom@fiu.edu
- d. Phone #: (305)348-3505
- 8. If there is a registered lobbyist, fill out the lobbyist information below.
 - a. Name: Chris Cantens
 - b. Firm: Florida International University
 - c. Email: ccantens@fiu.eu
 - d. Phone #: (305)348-3505
- 9. Organization or Name of Entity Receiving Funds(Please retype if same as Requestor or Contact):
 - a. Name: Florida International University
 - 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

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?

Deploy state of the art evidence-based instruction, learning technologies and advanced classroom assessment throughout critical Gateway and STEM courses.

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	Operations including project faculty, post-doctoral researchers, assistant directors, students and staff	3,995,314
Øf. Expenses/Equipment/Travel/Supplies/Other	Supplies for operations and funding to host annual Symposium supporting SUS & FCS sites	200,000
□g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		

☑h. Construction/Renovation/Land/Planning Engineering	Renovations to convert traditional classrooms into active learning classrooms.	800,000
TOTAL		4,995,314

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

ONon 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? 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>No</u>

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:

External validation of these efforts includes numerous peer-reviewed publications on their outcomes as well as externally reviewed and funded projects that leverage their outcomes. Forty peer-reviewed publications were published in the past 2 years, documenting the impact of the transformational efforts.

- 17. Will the requested funds be used directly for services to citizens? $\underline{\text{Yes}}$
 - 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)

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	Improved access to evidence-based active learning instruction. Improved success in critical Gateway and STEM courses	Fifty percent of FIU students will experience evidence-based instruction in at least one course within a year, and all students will experience evidence-based instruction in at least five courses within three years.
□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		
DEnhance 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		
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□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:	4,995,314	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	4,995,314	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
 - O>3-10M
 - ⊙>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?. Oongoing activity ? no total cost

O<1M O1-2M O>2-3M O>3-10M ⊙>10M