Appropriations Project Request - Fiscal Year 2018-19

For projects meeting the Definition of House Rule 5.14

- 1. Title of Project: Volusia STEM/Blended Learning
- 2. Date of Submission: <u>09/12/2017</u>
- 3. House Member Sponsor: <u>David Santiago</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, 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? $\underline{\mbox{Yes}}$
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2017-18 (If appropriated in 2017-18 enter the appropriated amount, even if vetoed.)			for FY 2017-18 for FY 2018-19 (Requests for additional RECURRING funds are prohibited.)		
Column:	А	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:		14,270	14,270		25,000	25,000

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? Yes

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.

Financial consequences might include items such as the withholding of a certain amount of funding (appropriate to the level of service being addressed) or percentage reductions in specified payments.

- 6. Requester:
 - a. Name: <u>Becky Porter</u>
 - b. Organization: Volusia County Schools (Edgewater Public School)
 - c. Email: rlporter@volusia.k12.fl.us
 - d. Phone #: <u>(386)428-2464</u>
- 7. Contact for questions about specific technical or financial details about the project:
 - a. Name: Becky Porter
 - b. Organization: Volusia County Schools (Edgewater Public School)
 - c. Email: rlporter@volusia.k12.fl.us
 - d. Phone #: (386)428-2464
- 8. Is there a registered lobbyist working to secure funding for this project?
 - a. Name: <u>None</u>
 - b. Firm: <u>None</u>
 - c. Email:
 - d. Phone #:
- 9. Organization or Name of entity receiving funds:
 - a. Name: Volusia County Schools
 - b. County (County where funds are to be expended): Volusia
 - c. Service Area (Counties being served by the service(s) provided with funding): Volusia
- 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)
 - 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?

Edgewater Public Elementary is requesting to implement a zSpace lab to further enhance our nationally recognized and certified STEM school program. The integration of this lab will boost the Reading and Science achievement of our Title 1 students. Our school improvement plan focuses on providing students with differentiated, rigorous instruction driven by standards. A strategy to reach our goal is through Digital Blended Learning. Using this zSpace technology will give students this opportunity

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		
□c. Expense/Equipment/Travel/Supplies/Other		
□d. Consultants/Contracted Services/Study		
Operational Costs:		
□e. Salaries and Benefits		
Øf. Expenses/Equipment/Travel/Supplies/Other	Purchase of equipment, one-time licensing fee, one-time onsite training and software.	25,000
□g. Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation:		
□h. Construction/Renovation/Land/Planning Engineering		
TOTAL		25,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category ?h. Fixed Capital Outlay? was selected), what type of ownership will the facility be under when complete? (Select one correct option)

<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:

Letter of Support from City of Edgewater

- 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>No</u>
- 17. Will the requested funds be used directly for services to citizens? Yes
 - 17a. What are the activities and services that will be provided to meet the purpose of the funds? zSpace technology combines elements of virtual reality and augmented reality to create lifelike experiences on the computer that are immersive and interactive to give the students a better understanding of content being taught.
 - 17b. Describe the direct services to be provided to the citizens by the funding requested. Virtual and augmented reality to create lifelike experiences on the computer.

17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups."). Select all that apply to the target population:

Elderly persons

- \Box 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

General (The majority of the funds will benefit no specific group)

□Other (Please describe)

17d. How many in the target population are expected to be served?

O< 25 O25-50 O51-100 O101-200 O201-400 O401-800 O>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		
□Improve mental health		
Enrich cultural experience		
Improve agricultural production/promotion/education		
☑Improve quality of education	Improve the reading and science	Measuring attendance and test

	achievement of Title 1 students.	scores.
□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	Increasing quality of education and access to future labor pool increases probability of local economic activity	Benefit is long term in nature and should produce an increase in economic activity based on local government data.
□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	Education studies have shown a correlation in reduced crime when a child has access to a diversified education.	Diversion could be measured by reduced crime rates from local police.
□Improve wastewater management		
□Improve stormwater management		
□Improve groundwater quality		
□Improve drinking water quality		
□Improve surface water quality		
L		

Other (Please describe):	

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?
1. Amount Requested from the State in this Appropriations Project Request:	25,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column E)	0	0.0%	No
4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	25,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

<u>No</u>