



Higher Education & Workforce Subcommittee

Wednesday, December 2, 2015
11:30 a.m. – 12:30 p.m.
102 HOB
Action Packet

Steve Crisafulli
Speaker

Elizabeth Porter
Chair

Committee Meeting Notice

HOUSE OF REPRESENTATIVES

Higher Education & Workforce Subcommittee

Start Date and Time: Wednesday, December 02, 2015 11:30 am
End Date and Time: Wednesday, December 02, 2015 12:30 pm
Location: Reed Hall (102 HOB)
Duration: 1.00 hrs

Consideration of the following bill(s):

HB 495 Florida Association of Centers for Independent Living by Harrell

Presentation - Florida FFA Association

Pursuant to rule 7.12, the deadline for amendments to bills on the agenda by non-appointed members shall be 6:00 p.m., Tuesday, December 01, 2015.

By request of the Chair all committee members are asked to have amendments to bills on the agenda submitted to staff by 6:00 p.m., Tuesday, December 01, 2015.

NOTICE FINALIZED on 11/25/2015 9:12AM by Gilliam.Ann

COMMITTEE MEETING REPORT
Higher Education & Workforce Subcommittee

12/2/2015 11:30:00AM

Location: Reed Hall (102 HOB)

Summary:

Higher Education & Workforce Subcommittee

Wednesday December 02, 2015 11:30 am

HB 495 Favorable

Yeas: 10

Nays: 0

Committee meeting was reported out: Wednesday, December 02, 2015 1:03:58PM

COMMITTEE MEETING REPORT
Higher Education & Workforce Subcommittee

12/2/2015 11:30:00AM

Location: Reed Hall (102 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
Elizabeth Porter (Chair)	X		
Robert Cortes	X		
Katie Edwards	X		
Julio Gonzalez	X		
James Grant	X		
Kristin Jacobs			X
Dave Kerner			X
W. Keith Perry	X		
Rene Plasencia	X		
Jake Raburn	X		
Michelle Rehwinkel Vasilinda	X		
Ray Rodrigues	X		
Cyndi Stevenson	X		
Totals:	11	0	2

Committee meeting was reported out: Wednesday, December 02, 2015 1:03:58PM



*Jacobs
Excused*

The Florida House of Representatives

Representative Kristin Jacobs

House District 96

November 16, 2015

Representative Elizabeth W. Porter, Chair
Higher Education & Workforce Subcommittee
313 House Office Building
402 South Monroe Street
Tallahassee, FL 32399-1300

Honorable Chair Porter,

Please excuse my absence from the Higher Education & Workforce Subcommittee on Wednesday, December 2nd, 2015. Due to prearrangements, I will be participating in the 7th Annual Southeast Florida Regional Climate Leadership Summit. Thank you for your consideration and understanding. If you have any questions please feel free to contact me, 850-717-5096.

Respectfully,

A handwritten signature in cursive script that reads "Kristin Jacobs".

Kristin Jacobs
Representative, District 96

CC: Heather Bishop, Policy Chief
Ann Gilliam, Senior Administrative Assistant

Gilliam, Ann

From: Shane, David
Sent: Tuesday, December 01, 2015 1:41 PM
To: Adams, Koby
Cc: Porter, Elizabeth; Gilliam, Ann; Bishop, Heather
Subject: Rep. Kerner 12/2 Absence

*Rep. Kerner
Excused*

Good afternoon Koby,

Representative Kerner respectfully requests to be excused from the Higher Education and Workforce Subcommittee Meeting on 12/2 due to a family emergency. Thank you for your consideration.

Respectfully,

David Shane

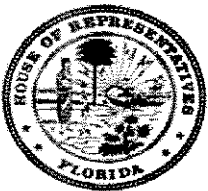
Legislative Assistant to
Representative Dave Kerner
Florida House of Representatives
87th District

District Office:

226 Cypress Lane, Suite 250
Palm Springs, Florida 33461
561.641.3406

Capitol Office:

1401 The Capitol
402 South Monroe Street
Tallahassee, FL 32399-1500
850.717.5087



Legislative Bio

Please note: Florida has a very broad public records law. Most written communications to or from state officials regarding state business are public records available to the public and media upon request. Your e-mail communications may therefore be subject to public disclosure.

COMMITTEE MEETING REPORT
Higher Education & Workforce Subcommittee

12/2/2015 11:30:00AM

Location: Reed Hall (102 HOB)

HB 495 : Florida Association of Centers for Independent Living

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Robert Cortes	X				
Katie Edwards	X				
Julio Gonzalez	X				
James Grant			X		
Kristin Jacobs			X		
Dave Kerner	X				
W. Keith Perry	X				
Rene Plasencia				X	
Jake Raburn	X				
Michelle Rehwinkel Vasilinda	X				
Ray Rodrigues	X				
Cyndi Stevenson	X				
Elizabeth Porter (Chair)	X				
Total Yeas: 10		Total Nays: 0			

Appearances:

Jim DeBeaugrine (General Public) - Waive In Support
 Florida Assn. of Centers for Independent Living
 215 S. Monroe St. # 802
 Tallahassee FL 32301
 Phone: 850-508-8908

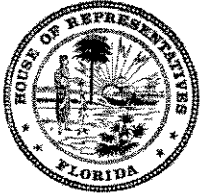
Paul Wharton - Waive In Support
 Florida Assn. of Centers for Independent Living
 2273 Saragossa Avenue
 Jacksonville FL 32217
 Phone: 904-563-0627

Stephen Wise - Waive In Support
 Florida Assn. of Centers for Independent Living
 4361 Charleston Lane
 Jacksonville FL 32210
 Phone: 904-759-6223

Linda Keen (Lobbyist) - Proponent
 Florida Assn. of Centers for Independent Living
 Executive Director
 325 John Knox Rd, Bldg. C - 132
 Tallahassee FL 32303
 Phone: 850-894-0336

Committee meeting was reported out: Wednesday, December 02, 2015 1:03:58PM

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: 495 Meeting Date: 12/2/2015

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Centers for Independent Living

Committee/Subcommittee: _____

Name: Jim DeBeaugrine (De Bø Grin)

Title: _____

Address: 215 S. Monroe, Ste. 802

City: Jallahassee State/Zip: FL 32301

Phone Number: 850-508-8908

Representing: Fla. Assn. of Centers for Independent Living

Registered Lobbyist: YES NO

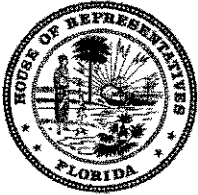
State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB-495 Meeting Date: Dec 2, 2015

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: Centers For Independent Living

Committee/Subcommittee: House Higher Ed / Work Force

Name: Paul Wharton

Title: _____

Address: 2273 Saragossa Ave

City: JAX State/Zip: FL 32217

Phone Number: 904 563-0627

Representing: Florida Centers For Independent Living

Registered Lobbyist: YES NO

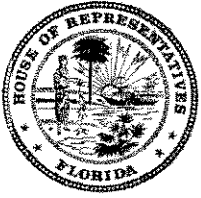
State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

W/S



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: HB 495 Meeting Date: 12/2/15

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Florida Center for Independent Living

Committee/Subcommittee: Higher Ed / Workforce

Name: STEPHEN WISE

Title: _____

Address: 4361 CHARLESTON LN.

City: JACKSONVILLE State/Zip: FL 32210

Phone Number: 904-759-6223

Representing: FACIL

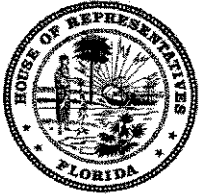
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: 495 Meeting Date: 12-2-15

Fill in appropriate information:

PCB/PCS/Amendment # or

Presentation/Workshop Topic: John Patrick Personal Attendant

Committee/Subcommittee: Higher Ed + Workforce Committee ^{Service Program}

Name: Linda Keen

Title: Exec Dir F.A.C.I.L.

Address: 325 John Knox Rd Bldg C-132

City: Tallahassee State/Zip: 32303

Phone Number: 850-~~894~~ 894-0336

Representing: FL. Assn of Centers for Independent living

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input checked="" type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input type="checkbox"/>		Info Only <input type="checkbox"/>	

COMMITTEE MEETING REPORT
Higher Education & Workforce Subcommittee

12/2/2015 11:30:00AM

Location: Reed Hall (102 HOB)

Presentation/Workshop/Other Business Appearances:

Florida FFA Association

Brooks Parrish (At Request Of Chair) - Information Only

FFA State President

P.O. Box 82

Trenton FL 32693

Phone: 352-494-4638

Florida FFA Association

Anne Schwartz (At Request Of Chair) - Information Only

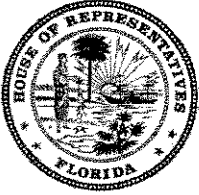
State Secretary

2800 SW 35th PL

Gainesville FL 32608

Phone: 813-957-0021

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COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

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Type or Print Clearly

Bill Number: _____ Meeting Date: 12-2-15

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Florida FFA

Committee/Subcommittee Higher Education & Workforce

Name: BROOKS Parrish

Title: FFA state president

Address: P.O. Box 82

City: Trenton State/Zip: FL, 32693

Phone Number: 352-444-4638

Representing: Florida FFA Association

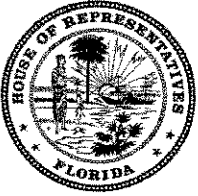
Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input checked="" type="checkbox"/>		Info Only <input type="checkbox"/>	



COMMITTEE/SUBCOMMITTEE APPEARANCE RECORD

Please fill out the entire form and submit two copies to the committee/subcommittee Administrative Assistant at the meeting.

Type or Print Clearly

Bill Number: _____ Meeting Date: 12/2/15

Fill in appropriate information:

PCB/PCS/Amendment # or Presentation/Workshop Topic: Florida FFA

Committee/Subcommittee: Higher Edu. + Workforce

Name: Anne Schwartz

Title: Florida FFA State Secretary

Address: 2800 SW 35th Pl

City: Gainesville State/Zip: FL/32608

Phone Number: 813 957 0021

Representing: Florida FFA

Registered Lobbyist: YES NO

State Employee: YES NO

I Wish To Speak: YES NO

I Have Been Requested to Speak: YES NO

Bill		Amendment	
Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>	Proponent <input type="checkbox"/>	Opponent <input type="checkbox"/>
Info Only <input checked="" type="checkbox"/>		Info Only <input type="checkbox"/>	