1. **Title of Project:** The ECHO Project - Ensuring Children Have Outstanding teachers

2. **Senate Sponsor:** Kathleen Passidomo

3. **Date of Submission:** 11/10/2017

4. **Project/Program Description:**
   Amid concerns about the shortage of qualified teachers in the U.S. we plan to implement aggressive strategies to expand and improve the teaching pool. These efforts include increasing salaries, strengthening early outreach, streamlining the hiring process and providing incentives to teachers in areas of highest need. These programs will make it possible to create a pipeline of qualified teachers by recruiting and training individuals from the community.

5. **State Agency Contacted? No**
   a. If yes, which state agency?
   b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Education

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

<table>
<thead>
<tr>
<th>Amount Requested for Operations</th>
<th>Amount Requested for Fixed Capital Outlay</th>
<th>Total Amount of Requested State Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,634,000</td>
<td></td>
<td>3,634,000</td>
</tr>
</tbody>
</table>

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

<table>
<thead>
<tr>
<th>Type</th>
<th>Amount</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>State (excluding the amount of this request)</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Local</td>
<td>210,000</td>
<td>5.4%</td>
</tr>
<tr>
<td>Other</td>
<td>50,000</td>
<td>1.3%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>260,000</td>
<td>6.7%</td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 3,894,000

9. **Previous Year Funding Details:**
   a. Has funding been provided in a previous state budget for this activity? No
   b. In the previous 5 fiscal years, how many years was funding provided? (Optional)
   c. What is the most recent fiscal year the project was funded?
d. Were the funds provided in the most recent fiscal year subsequently vetoed?
e. Complete the following Worksheet.

<table>
<thead>
<tr>
<th>FY:</th>
<th>Input Prior FY Appropriation for this project for FY 2017-18</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)</td>
</tr>
<tr>
<td>Column:</td>
<td>A</td>
</tr>
<tr>
<td>Funds Description:</td>
<td>Prior Year Recurring Funds *</td>
</tr>
<tr>
<td>Input Amounts:</td>
<td></td>
</tr>
</tbody>
</table>

10. Is future-year funding likely to be requested?
   Yes
   a. If yes, indicate non-recurring amount per year.
      $3,500,000

11. Program Performance:
   a. What is the specific purpose or goal that will be achieved by the funds requested?
      The District will have its own pipeline of qualified teachers and have the ability to recruit and retain these teachers.
   b. What are the activities and services that will be provided to meet the intended purpose of these funds?
      Career ladder for teachers, providing qualified teachers the opportunity to earn additional compensation for outstanding performance. New teacher academy - Will provide training on best practices to improve teacher performance. Grow Your Own Scholarship Program - Provide financial assistance to college bound students to become teachers. Recruitment tools - Provide the ability to attend or hold recruitment events, provide sign-on bonuses and relocation bonuses to attract the best teaching candidates.
   c. How will the funds be expended?

<table>
<thead>
<tr>
<th>Spending Category</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☑ Executive Director/Project Head Salary and Benefits</td>
<td>Project Manager</td>
<td>105,000</td>
</tr>
<tr>
<td>☐ Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## 12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

This is a public school district.

## 13. Requestor Contact Information:

a. **Name:** Gregory Atkins  
b. **Organization:** Lee County Public Schools  
c. **Email:** gregad@leeschools.net  
d. **Phone Number:** (239)337-8300
14. **Recipient Contact Information:**
   a. **Organization:** Lee County Public Schools
   b. **County:** Lee
   c. **Organization Type:**
      - For Profit
      - Non Profit 501(c) (3)
      - Non Profit 501(c) (4)
      - Local Entity
      - University or College
      - Other (Please specify) School District of Lee County
   d. **Contact Name:** Angela Pruitt
   e. **E-mail Address:** angleaAP@leeschools.net
   f. **Phone Number:** (239)337-8509

15. **If there is a registered lobbyist, fill out the lobbyist information below.**
   a. **Name:** Bob Cerra
   b. **Firm:** Cerra Consulting Group, Inc.
   c. **Email:** bobcerra@comcast.com
   d. **Phone Number:** (850)222-4428