1. **Title of Project:** Hillsborough Community College Allied Health Building

2. **Senate Sponsor:** Dana Young

3. **Date of Submission:** 01/09/2018

4. **Project/Program Description:**
   
   Completion of the Allied Health Building will address the Tampa Bay region’s need for highly trained healthcare professionals while also maintaining HCC’s competitive position as a provider of first choice for the region’s skilled healthcare workforce.

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

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></td>
<td>13,000,000</td>
<td>13,000,000</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>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 13,000,000

9. **Previous Year Funding Details:**

   a. Has funding been provided in a previous state budget for this activity? Yes
   
   b. In the previous 5 fiscal years, how many years was funding provided? (Optional) 2
   
   c. What is the most recent fiscal year the project was funded? 2017-18
   
   d. Were the funds provided in the most recent fiscal year subsequently vetoed? No
   
   e. Complete the following Worksheet.
The Florida Senate
Local Funding Initiative Request - Fiscal Year 2018-2019

Input Prior FY Appropriation for this project
for FY 2017-18
(If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)

<table>
<thead>
<tr>
<th>Column:</th>
<th>A</th>
<th>B</th>
<th>C</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funds Description:</td>
<td>Prior Year Recurring Funds *</td>
<td>Prior Year Nonrecurring Funds *</td>
<td>Total Funds Appropriated (Column A + Column B)</td>
</tr>
<tr>
<td>Input Amounts:</td>
<td>10,000,000</td>
<td>10,000,000</td>
<td>10,000,000</td>
</tr>
</tbody>
</table>

10. Is future-year funding likely to be requested?

   No

11. Program Performance:
   
   a. What is the specific purpose or goal that will be achieved by the funds requested?

   The Allied Health Building will address the Tampa Bay region’s need for highly trained healthcare professionals while also maintaining HCC’s competitive position as a provider of first choice for the region’s skilled healthcare workforce.

   b. What are the activities and services that will be provided to meet the intended purpose of these funds?

   Funds would be used to complete construction of a new Allied Health Building to house primary care and diagnostic allied health programs on HCC’s Dale Mabry Campus. The facility would provide space for instruction and hands-on learning using the latest technological advances that are employed in the health sciences fields.

   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></td>
<td></td>
</tr>
<tr>
<td>☐ Other Salary and Benefits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Expense/Equipment/Travel/Supplies/Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Consultants/Contracted Services/Study</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operational Costs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Salary and Benefits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Expense/Equipment/Travel/Supplies/Other</th>
<th>Consultants/Contracted Services/Study</th>
<th>Fixed Capital Construction/Major Renovation</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>☑</td>
</tr>
</tbody>
</table>

☑ Construction/Renovation/Land/Planning Engineering

Funds will be used to complete construction of the Allied Health Building

<table>
<thead>
<tr>
<th>TOTAL</th>
<th>13,000,000</th>
</tr>
</thead>
</table>

**d. What are the direct services to be provided to citizens by the appropriations project?**

Funds would be used to complete construction of a new Allied Health Building to house primary care and diagnostic allied health programs on HCC's Dale Mabry Campus. The facility would provide space for instruction and hands-on learning using the latest technological advances that are employed in the health sciences fields.

**e. Who is the target population served by this project? How many individuals are expected to be served?**

Jobless persons, economically disadvantaged persons, high school students, university/college students. Greater than 800 people.

**f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

Benefits and outcomes: Improving quality of education, Increasing and improving economic activity, creating specific immediate job opportunities and enhancing specific individuals economic self sufficiency. Specific measures of benefits and outcomes: Increases in the number of high-wage employment opportunities, improved or increased standard of living for individuals and families. Methodologies for measuring levels of benefits and outcomes: Using HCC's enterprise system, student performance data will be collected to include pre & post basic skills test results and the number of certifications/licenses earned, tracking pre and post employment data and tracking pre and post economic data and quality of life standards.

**g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?**

Reversal of appropriation

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.**

Hillsborough Community College

13. **Requestor Contact Information:**

a. **Name:** Eric Johnson
b. **Organization:** Hillsborough Community College
c. Email: Ejohnson71@hccfl.edu
d. Phone Number: (813)253-7560

14. Recipient Contact Information:
a. Organization: Hillsborough Community College
b. County: Hillsborough
c. Organization Type:
   ☐ For Profit
   ☐ Non Profit 501(c) (3)
   ☐ Non Profit 501(c) (4)
   ☐ Local Entity
   ☐ University or College
   ☐ Other (Please specify)
d. Contact Name: Eric Johnson
e. E-mail Address: Ejohnson71@hccfl.edu
f. Phone Number: (813)253-7560

15. If there is a registered lobbyist, fill out the lobbyist information below.
a. Name: Laura Boehmer
b. Firm: Southern Strategy Group
c. Email: boehmer@sostrategy.com
d. Phone Number: (813)563-4100