



# The Florida Senate

## Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Putnam County School District Advanced Manufacturing

2. **Senate Sponsor:** Keith Perry

3. **Date of Submission:** 01/18/2018

4. **Project/Program Description:**

The advanced manufacturing program will provide students the skills necessary to obtain a job in manufacturing fields.

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:**

Amount Requested for Operations	Amount Requested for Fixed Capital Outlay	Total Amount of Requested State Funds
250,000	250,000	500,000

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

Type	Amount	Percent
Federal	0	0.0%
State (excluding the amount of this request)	0	0.0%
Local	300,000	37.5%
Other	0	0.0%
TOTAL	300,000	37.5 %

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 800,000

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.



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<b>FY:</b>	<b>Input Prior FY Appropriation for this project for FY 2017-18</b> (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.)		
<b>Column:</b>	<b>A</b>	<b>B</b>	<b>C</b>
<b>Funds Description:</b>	<b>Prior Year Recurring Funds *</b>	<b>Prior Year Nonrecurring Funds *</b>	<b>Total Funds Appropriated (Column A + Column B)</b>
<b>Input Amounts:</b>			

**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?**

To enhance and expand the advanced manufacturing program in order for students to have the skills necessary to obtain a job in manufacturing fields as offered by local industry.

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

Students and adults will learn skills necessary to obtain jobs within the local manufacturing industry.

**c. How will the funds be expended?**

Spending Category	Description	Amount
Administrative Costs		
<input type="checkbox"/> Executive Director/Project Head Salary and Benefits		
<input type="checkbox"/> Other Salary and Benefits		
<input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other	The funds requested would be used to purchase the equipment and supplies necessary to teach the curriculum frameworks of the advanced manufacturing program.	250,000
<input type="checkbox"/> Consultants/Contracted Services/Study		



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Operational Costs		
<input type="checkbox"/> Salary and Benefits		
<input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other		
<input type="checkbox"/> Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Renovation		
<input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering	The funds requested would be used to plan and renovate an existing classroom and shop area of a high school to accommodate the required equipment for the advanced manufacturing program.	250,000
TOTAL		500,000

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

Job training skills to meet the needs of local industry.

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

Jobless persons, economically disadvantaged persons, at-risk youth, and high school students.

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

First, students and program graduates will become successful citizens as a result of improving the quality of education. This will be measured by ensuring 100% of students participating in the program receive industry certification. Second, students and adults who complete the program will possess employable skills leading to employment and, ultimately, improved economic activity.

**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?**

Payback of funds

**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.**

State agency owned facility.

**13. Requestor Contact Information:**

**a. Name:** Rick Surrency

**b. Organization:** Putnam County School District



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- c. **Email:** [rsurrency@my.putnamschools.org](mailto:rsurrency@my.putnamschools.org)
- d. **Phone Number:** [\(386\)329-0653](tel:(386)329-0653)

### 14. Recipient Contact Information:

- a. **Organization:** [Putnam County School District](#)
- b. **County:** [Putnam](#)
- 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:** [Laura France](#)
- e. **E-mail Address:** [lfrance@my.putnamcountyschools.org](mailto:lfrance@my.putnamcountyschools.org)
- f. **Phone Number:** [\(386\)329-0646](tel:(386)329-0646)

### 15. If there is a registered lobbyist, fill out the lobbyist information below.

- a. **Name:** [David Browning](#)
- b. **Firm:** [Southern Strategy Group](#)
- c. **Email:** [browning@sostrategygroup.com](mailto:browning@sostrategygroup.com)
- d. **Phone Number:** [\(850\)222-0821](tel:(850)222-0821)