1. **Title of Project:** Fred G. Minnis Pilot Juvenile Offender Betterment Services (JOBS)

2. **Senate Sponsor:** Darryl Rouson

3. **Date of Submission:** 01/23/2018

4. **Project/Program Description:**
   Juvenile Re-Entry Program - Job Assistance

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 Juvenile Justice

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>30,000</td>
<td></td>
<td>30,000</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):** 30,000

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.
### Input Prior FY Appropriation for this project

(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></td>
<td></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.

30,000

### 11. Program Performance:

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

To give children with a prior juvenile record the opportunity to learn a trade and/or skill while earning income.

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

The activities and services will be job training, job placement and mentorships.

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>Consultants/Contracted Services</td>
<td>30,000</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>
d. **What are the direct services to be provided to citizens by the appropriations project?**
   
   The activities and services will be job training, job placement and mentorships.

e. **Who is the target population served by this project? How many individuals are expected to be served?**
   
   Juvenile Prolific Offenders Youth as defined by FS 985.255(1)(j) We are targeting youth who have prior felony convictions and youth coming home from “programs.” Ages: 15-18

f. **What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**
   
   The expected outcome is to reduce recidivism in the juvenile justice system by providing jobs, job training and mentorship.

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?**
   
   Decrease or stop funding.

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.
   
   n/a

13. **Requestor Contact Information:**
   a. **Name:** Shaquana Harper  
   b. **Organization:** Fred G. Minnis, Sr. Bar Association  
   c. **Email:** ShaquanaCHarper@gmail.com  
   d. **Phone Number:** (407)432-5713

14. **Recipient Contact Information:**
   a. **Organization:** Fred G. Minnis, Sr. Bar Association  
   b. **County:** Pinellas  
   c. **Organization Type:**  
      - For Profit  
      - Non Profit 501(c) (3)
d. Contact Name: Shaquana Harper

e. E-mail Address: ShaquanaCHarper@gmail.com

f. Phone Number: (407)432-5713

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

a. Name: None

b. Firm: None

c. Email:

d. Phone Number: