



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2023-2024

LFIR # 1940

1. Project Title Summer Boost Kindergarten Readiness Camp

2. Senate Sponsor Jay Collins

3. Date of Request 02/22/2023

## 4. Project/Program Description

To improve kindergarten readiness for approximately one third of rising kindergartners deemed not ready for school, the ELCHC Summer Boost program solicits funding to pair instruction with early education professionals and students who have proven success with 85% or higher classroom readiness scores to work with professionals with fewer than 70% overall readiness scores. The program also includes a family engagement component to ensure a holistic approach to preparing the child for kindergarten.

5. State Agency to receive requested funds Department of Education

State Agency contacted? Yes

## 6. Amount of the Nonrecurring Request for Fiscal Year 2023-2024

Type of Funding	Amount
Operations	2,067,211
Fixed Capital Outlay	0
<b>Total State Funds Requested</b>	<b>2,067,211</b>

## 7. Total Project Cost for Fiscal Year 2023-2024 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,067,211	100%
<b>Matching Funds</b>		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
<b>Total Project Costs for Fiscal Year 2023-2024</b>	<b>2,067,211</b>	<b>100%</b>

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future funding likely to be requested? No

a. If yes, indicate nonrecurring amount per year.

b. Describe the source of funding that can be used in lieu of state funding.

10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

No



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If yes, indicate the amount of funds received and what the funds were used for.

## Complete questions 11 and 12 for Fixed Capital Outlay Projects

### 11. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

### 13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Cover cost of operational expenses related to organizing and coordinating programs	80,000
Expense/Equipment/Travel/Supplies/Other	Cover the cost of preschool curriculum to be used as well as the outreach and awareness efforts for the program	348,611
Consultants/Contracted Services/Study	Covers the cost of stipends to teachers, pays for the cost of substitute teachers, covers the cost of care for child to attend camp, pays stipend to family for attending service training.	1,638,600
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		0
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>2,067,211</b>

### 14. Program Performance

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

Provide educational support to approximately one-third (or 1000) of the most vulnerable young learners in the county whose Voluntary Pre Kindergarten (VPK) progress monitoring assessments indicate they are unprepared for their first day of kindergarten. The program will work to prevent summer learning loss and engage families in their child's learning journey and to strengthen early education professionals throughout Hillsborough County.



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

Support early education professionals with pedagogy and monetary incentives. Support families with in service training to better prepare them with activities for their child and cover the cost of four weeks of summer care. Early education business owners will be compensated to identify substitute teachers and receive resources and curriculum for their schools.

**c. What direct services will be provided to citizens by the appropriation project?**

Support for early learning programs, early education professionals, and families to prevent summer learning loss and prepare children for kindergarten.

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

Approximately 1000 preschool students

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

To improve the quality of educational experiences for preschool students identified as not ready for kindergarten. To accomplish this, there will be a focus on family engagement measured by the number of hours the family commits to learning. Additionally, early education professionals will receive enhanced professional development measured by surveys to determine the transfer of pedagogy. Overall measurement will be captured in the outcomes of the PM3 to the first 30 days of kindergarten.

**f. 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 the contract?**

Funding will be returned

**15. Requester Contact Information**

**a. First Name**  **Last Name**   
**b. Organization**   
**c. E-mail Address**   
**d. Phone Number**  **Ext.**

**16. Recipient Contact Information**

**a. Organization**   
**b. Municipality and County**

**c. Organization Type**

- ☐ For Profit Entity  
☒ Non Profit 501(c)(3)  
☐ Non Profit 501(c)(4)  
☐ Local Entity  
☐ University or College  
☐ Other (please specify)



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d. First Name  Last Name

e. E-mail Address

f. Phone Number

#### 17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number