

Operations

Fixed Capital Outlay

Total State Funds Requested

The Florida Senate Local Funding Initiative Request Fiscal Year 2023-2024

LFIR # 1735

400,000

576,000

976,000

				_
6. Amount of the No	nrecurring Request for Fis	cal Year 2023-2024		
State Agency con	tacted? Yes			
5. State Agency to re	eceive requested funds	Department of Education)	
individuals with aut	tism are broadly understood. Forts needed to complete inte	nclusive community where the . Adults with autism spectrure ensive learning experiences	m disorder (ASD) will be	given the curriculum,
4. Project/Program [Description			
3. Date of Request	02/21/2023			
2. Senate Sponsor	Jay Trumbull			
1. Project Title	NextStep Autism Transi	ition Program for Adults		

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)	976,000	84%	
Matching Funds			
Federal	0	0%	
State (excluding the amount of this request)	0	0%	
Local	187,000	16%	
Other	0	0%	
Total Project Costs for Fiscal Year 2023-2024	1.163.000	100%	

8. Has this project previously received state funding?

Yes

Fiscal Year	Amo	ount	Specific	Vetoed
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	
2022-23	0	400,000	26	No

9. Is future funding likely to be requested?	9. Is future fund	ding likely to b	e requested?
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a. If yes, indicate nonrecurring amount per year.

400,000

Yes

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

Endeavor continues to initiate private donors through the foundation. Some funds will be raised through tuition; however, tuition costs are kept at a low rate to provide greater access to students.

10. Has the entity requesting this	project received an	y federal assistance related to the C	;OVID-19 pandemic?
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AI.		
Nο		



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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?

b. Is the project "shovel ready" (i.e permitted)?	Yes
c. What is the estimated start date of construction?	08/01/2023
d. What is the estimated completion date of construction?	06/01/2024

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.

The local government will maintain ownership of the facility.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study	Contracted services for accountant and grant manager	11,000
Operational Costs: Other		
Salary and Benefits	Program Director (\$114,951-including benefits), Program Coordinator (\$43,012-including benefits), Transition Coach/Instructor (\$76,934-including benefits)	234,897
Expense/Equipment/Travel/Supplies/ Other	Learn4Independence® curriculum (\$5,000/year), data collection software (7 licenses=\$2,100/year), office supplies (\$1,556), copier lease (\$2,200/year), postage (\$50), small equipment/adaptive devices for participants (\$2,000), fuel, insurance, and vehicle maintenance (\$4,125), training (\$600), and building operating costs (property insurance, maintenance, utilities, and internet-\$35,000)	52,631
Consultants/Contracted Services/Study	Contracted services for job coaches (\$79,200), Board Certified Behavior Analyst (\$15,360), and Registered Behavior Technician (\$6,912) to provide assessments, data collection, evaluations, coaching, and instruction in employment, community, and independent living settings—and to provide training and supervision to staff and other contractors as needed.	101,472
Fixed Capital Construction/Majo	r Renovation:	
Construction/Renovation/Land/ Planning Engineering	Funds will be used to renovate an existing building on the campus of NextStep Academy. Participants attending NextStep's two-year transition academy program will live in these renovated spaces to learn, practice, and apply the skills necessary to live independently.	576,000



a. Organization

b. Municipality and County Jackson

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otal State Funds I	Requested (must equal to	otal from que	estion #6)		976,000
Program Performa	nce				
a. What specific p	urpose or goal will be a	chieved by th	e funds requested?		
individuals with au	step Academy is to build and tism are broadly understood to complete in the independently.	od. Adults with	n autism spectrum disorde	er (ASD) will be give	n the curriculum,
b. What activities	and services will be pro	vided to mee	t the intended purpose	of these funds?	
internships, compe	in Learn4Independence® etitive employment, and se ne residential component of	If-employmen	it), direct instruction in inc	dependent living skills	s, and applied
c. What direct ser	vices will be provided to	citizens by t	he appropriation projec	et?	
natural supports at	in both classroom and nate t work and in the communi), maintenance, follow-up	ty, assessmei	nt, targeted goals (emplo	yment, social, comm	unication,
d. Who is the targ	et population served by	this project?	How many individuals	are expected to be	served?
The target popula	tion corred by this project				
but still need supp	ort for success. These indi	viduals may b	with autism who have ago be jobless, economically of etween 51-100 individuals	disadvantaged, deve	
but still need suppodisabled, and/or contact e. What is the exp		viduals may between the between the control of the	pe jobless, economically of etween 51-100 individuals	disadvantaged, deve s.	lopmentally
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NexStep at Endeavor Academy



17.

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c. Organization Ty	pe					
□For Profit Entity						
☑Non Profit 501(c	c)(3)					
□Non Profit 501(c)(4)						
□Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
d. First Name	Tammy	Last Name	Dasher			
e. E-mail Address	tdasher@nextstepatendea	avor.org				
f. Phone Number	(850)718-8925					
Lobbyist Contact I	nformation					
a. Name	None					
b. Firm Name	None					
c. E-mail Address						
d. Phone Number						