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The Florida Senate

Local Funding Initiative Request Fiscal Year 2019-2020

LFIR#: 1433

1. Title of Project: Miami-Dade Adults with Disabilities Program

Senate Sponsor: Anitere Flores
 Date of Submission: 02/05/2019

4. Project/Program Description:

The Adult-Special Needs Assistance Project (A-SNAP) is delivered to the residents of Miami-Dade County, Florida through Miami-Dade County Public Schools utilizing certified, part-time hourly teachers. The program is targeted at Adults with Disabilities and Senior Citizens with Disabilities who are not seeking competitive employment. The program responds to the need to maintain the highest possible level of cognitive ability, halt or reverse intellectual decline, enhance self-esteem, stimulate those who have achieved higher levels of education, enhance creative abilities and promote independence and community living.

5. State Agency to receive requested funds : Department of Education

State Agency Contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020

Type of Funding	Amount
Operations	1,125,208
Fixed Capital Outlay	
Total State Funds Requested	1,125,208

7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	1,125,208	100.00%
Federal		0.00%
State (excluding the amount of this request)		0.00%
Local		0.00%
Other		0.00%
Total Project Costs for Fiscal Year 2019-2020	1,125,208	100.0%

8. Has this project previously received state funding? Yes

Fiscal Year	Amount		Specific	
(yyyy-yy)	Recurring	NonRecurring	Appropriation #	Vetoed
2018-19	1,125,208		32	No

Is future-year funding likely to be requested? Yes

a. If yes, indicate non-recurring amount per year. 0



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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and		
Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits	State funds will be expended on salaries, benefits etc. for part-time	1,118,909
	hourly teachers.	
Expense/Equipment/Travel/Supplies/Other	State funds will be expended on the purchase of books and	6,299
	supplies needed to conduct classes that meet the educational	
	needs of the program participants.	
Consultants/Contracted Services/Study		
Fixed Capital Construction/Major Re	novation:	
Construction/Renovation/Land/Planning		
Engineering		
Total State Funds Requested (must e	egual total from guestion #6)	1,125,208

11. Program Performance:

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

This program benefits the State because it improves the quality of life for its residents with disabilities. Individuals with disabilities have faculties that must be harnessed and nurtured.

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

The program responds to the need to maintain the highest possible level of cognitive ability, halt or reverse intellectual decline, enhance self-esteem, stimulate those who have achieved higher levels of education, enhance creative abilities and promote independence and community living.

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

The educational needs of the program participants will be fostered through a collaborative effort between the affiliated agencies and the adult education centers.

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

The program is targeted at Adults with Disabilities and Senior Citizens with Disabilities who are not seeking competitive employment. We expect to serve 2800 individuals.

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

The needs of the targeted populations will be individualized/customized through the Adult Individual Educational Plan (AIEP) for Adults with Disabilities and Senior Citizens with Disabilities.

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- 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 in the contract?
 None.
- 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.

NA

13. Requestor Contact Information:

a. Name: Iraida Mendez-Cartaya

b. Organization: Miami-Dade County Public Schoolsc. E-mail Address: imendez@dadeschools.net

d. Phone Number: (305)995-1497

14. Recipient Contact Information:

a. Organization: Miami-Dade County Public Schools

b. County: Miami-Dadec. Organization Type:

O For Profit

O Non Profit 501(c) (3)

O Non Profit 501(c) (4)

Local Entity

O University or College

O Other (Please specify)

d. Contact Name: Iraida Mendez-Cartayae. E-mail Address: imendez@dadeschools.net

f. Phone Number: (305)995-1497

15. Lobbyist Contact Information

a. Name: Iraida Mendez-Cartaya

b. Firm Name: Miami-Dade County Public Schoolsc. E-mail Address: imendez@dadeschools.net

d. Phone Number: (305)995-1497