



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1373

1. **Project Title** Fred G. Minnis Pilot Expansion
2. **Senate Sponsor** Darryl Rouson
3. **Date of Request** 11/20/2019

4. **Project/Program Description**

Juvenile Re-Entry Program- Job Assistance Juvenile Offender Bettermen Services (JOBS)

5. **State Agency to receive requested funds** Department of Juvenile Justice
- State Agency contacted? ☒ Yes ☐ No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	100,000
Fixed Capital Outlay	000
Total State Funds Requested	100,000

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	100000	100.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	00	0 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	100,000	100 %

8. **Has this project previously received state funding?** ☒ Yes ☐ No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2019-20	00	100,000	2404	No

9. **Is future-year funding likely to be requested?** ☒ Yes ☐ No

If yes, indicate nonrecurring amount per year. 100,000



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1373

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: Other		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study	Consultants/Contracted Services	100,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		100,000



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1373

11. Program Performance

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

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

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

Through mentoring the children will undergo training to help assist them with job placement.

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

The activities and services will be job training, job placement and mentor-ship.

- d. 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.

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

The expected income is to reduce recidivism in the justice juvenile system by providing jobs, job training, and mentor-ship.

- 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?

Decrease or stop funding.



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2020-2021

LFIR # 1373

12. 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.

n/a

13. Requestor Contact Information

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

14. 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)
- d. First Name Last Name
- e. E-mail Address
- f. Phone Number

15. Lobbyist Contact Information

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number Ext.