



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1773

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

At the Adult Literacy League we serve to build a literate community. Our mission is: we empower Central Floridians to be thriving members of our community through literacy and education. We recruit and train volunteers to serve as one-to-one tutors and class instructors to hundreds of adult learners weekly. We respectfully request funding from the State of Florida in support of ongoing and vital services we provide, so that we might continue to serve our community for another 53 years into the future. A literate community is an inclusive, safe, and healthy community!

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

| Type of Funding | Amount |
|------------------------------------|---------------|
| Operations | 25,000 |
| Fixed Capital Outlay | 0 |
| Total State Funds Requested | 25,000 |

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|--|---------------|-------------|
| Total State Funds Requested (from question #6) | 25,000 | 100% |
| Matching Funds | | |
| Federal | 0 | 0% |
| State (excluding the amount of this request) | 0 | 0% |
| Local | 0 | 0% |
| Other | 0 | 0% |
| Total Project Costs for Fiscal Year 2021-2022 | 25,000 | 100% |

8. Has this project previously received state funding?

| Fiscal Year (yyyy-yy) | Amount | | Specific Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
| | Recurring | Nonrecurring | | |
| 2020-21 | | 25,000 | 114 | Yes |

9. Is future funding likely to be requested?

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?



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

We received a PPP loan from the SBA in April 2020. These funds were used to bring our staff back from furlough, covering payroll and payroll-related costs. We just received a second draw PPP loan from the PPP on 2/1/2021.

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

| Spending Category | Description | Amount |
|--|--|---------------|
| Administrative Costs: | | |
| Executive Director/Project Head Salary and Benefits | Program Manager Salary (\$4,100) Payroll Taxes (\$314) Benefits (\$820) | 5,234 |
| Other Salary and Benefits | Intake and Assessment Specialist Salary (\$2,800) Payroll Taxes (\$214) Benefits (\$642) | 3,656 |
| Expense/Equipment/Travel/Supplies/Other | A percentage of each of the following: Adult Literacy League office rental, utilities, computers/technology/databases, student data management system, curricula/books, volunteer management expenses | 16,110 |
| Consultants/Contracted Services/Study | | 0 |
| Operational Costs: Other | | |
| Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/Other | | 0 |
| Consultants/Contracted Services/Study | | 0 |
| Fixed Capital Construction/Major Renovation: | | |
| Construction/Renovation/Land/Planning Engineering | | 0 |
| Total State Funds Requested (must equal total from question #6) | | 25,000 |

12. Program Performance

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

We will recruit, orient, and train volunteers to serve as tutors and instructors to the adult students we serve. We offer 20 online classes to adult learners in Central Florida. We are currently supporting the efforts of 246 pairs (volunteer tutor + student). Our students are working to improve their reading and writing, and English communication skills. These funds will support our operating costs - rent, technology, and staffing. We are a small and streamlined staff of only 4 FT and 2 PT, yet our impact is great, serving more than 1,000 adult learners annually.

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

One-to-one tutoring (both virtual and in-person), online English conversation classes, online ABE (Adult Basic Education) classes.

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

Education via one-to-one tutoring, online classes, and when it's safe to reconvene in-person again, in-person classes.

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

We serve adults, aged 18 and over in Orange, Osceola, and Seminole counties. Our goal is to recruit and serve fifty (50) new adult students.

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



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Improved quality of life through improved literacy skills. Increased English language proficiency. Improved health and safety through increased access to health and financial literacy topics. Enter / improved employment. Enhanced economic self-sufficiency through improved employment opportunities.

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?

If the Adult Literacy League fails to meet the deliverables or performance measures, an appropriate penalty would be the loss of a percentage (correlated to the percentage of deliverable "failure") of the grant funds.

13. 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



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14. Requestor Contact Information

a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

15. 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

16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number