

LFIR # 2481

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| | | cle Entrepreneur | and Career Program | | | |
|--|--|---|---|--|--|--|
| Project Title | Breaking Da Cyo | | | | | |
| Senate Sponsor | Shevrin Jones | | | | | |
| Date of Request | 01/11/2022 | | | | | |
| Project/Program De | escription | | | | | |
| ufficiency, and finar | ncial stability. The p | ourpose of the pro | s that have a great impa gram is to provide at-ris l opportunity to learn a s | sk persons 16-24 ir | | |
| State Agency to red | ceive requested fu | ınds Depart | ment of Economic Opp | ortunity | | |
| State Agency conta | icted? No | | | | | |
| Amount of the Nonr | recurring Request | for Fiscal Year 2 | 2022-2023 | | | |
| Type of Funding | | | Amo | Amount | | |
| Operations | | 508,000 | | | | |
| Fixed Capital Outlay | | | 145,000 | | | |
| Total State Funds F | Requested | | | 653,000 | | |
| otal Project Cost f | or Fiscal Year 202 | 2-2023 (includin | g matching funds ava | ilable for this pro | | |
| • | or Fiscal Year 202 | 2-2023 (includin | g matching funds ava Amount | ilable for this proj | | |
| Гуре of Funding | | | | | | |
| ype of Funding otal State Funds R | | | Amount | Percentage | | |
| Type of Funding Fotal State Funds R Matching Funds Federal | equested (from que | estion #6) | Amount 653,000 | Percentage 100% | | |
| Type of Funding Total State Funds Rounds Matching Funds Federal | equested (from que | estion #6) | Amount 653,000 | Percentage 100% 0% 0% | | |
| type of Funding otal State Funds Relatching Funds dederal state (excluding the ocal | equested (from que | estion #6) | Amount 653,000 0 0 | Percentage 100% 0% 0% 0% | | |
| Type of Funding Fotal State Funds R Matching Funds Federal State (excluding the | equested (from que | estion #6) | Amount 653,000 | Percentage 100% 0% 0% | | |
| Type of Funding Total State Funds Romatching Funds Federal State (excluding the Local Other | equested (from que amount of this requ | estion #6) | Amount 653,000 0 0 | Percentage 100% 0% 0% 0% | | |
| Total Project Cost for Type of Funding Total State Funds Romatching Funds Federal State (excluding the Local Other Total Project Costs Has this project press | equested (from que amount of this requ | pestion #6) uest) 022-2023 | Amount 653,000 0 0 0 | Percentage 100% 0% 0% 0% 0% | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre | equested (from que amount of this requ s for Fiscal Year 20 | pestion #6) uest) 022-2023 | Amount 653,000 0 0 0 653,000 No Specific | Percentage 100% 0% 0% 0% 0% | | |
| Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre | equested (from que amount of this requ s for Fiscal Year 20 | estion #6) uest) 022-2023 state funding? | Amount 653,000 0 0 0 0 653,000 | Percentage 100% 0% 0% 0% 100% | | |
| Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project pre Fiscal Year (yyyy-yy) | equested (from que amount of this requested for Fiscal Year 20 eviously received Amo | estion #6) D22-2023 State funding? Dunt Nonrecurring | Amount 653,000 0 0 0 653,000 No Specific Appropriation # | Percentage 100% 0% 0% 0% 100% | | |
| Type of Funding Total State Funds Remark Funds Tederal State (excluding the Local Other Total Project Costs Has this project prefered (yyyy-yy) | equested (from que amount of this requested for Fiscal Year 20 eviously received Amo | estion #6) D22-2023 State funding? Dunt Nonrecurring | Amount 653,000 0 0 0 653,000 No Specific | Percentage 100% 0% 0% 0% 100% | | |
| Type of Funding Total State Funds Reflecting Funds Tederal State (excluding the local Other Total Project Costs Tas this project preflect (yyyy-yy) | amount of this requested for Fiscal Year 20 eviously received Amo | estion #6) D22-2023 State funding? Dunt Nonrecurring | Amount 653,000 0 0 0 653,000 No Specific Appropriation # | Percentage 100% 0% 0% 0% 100% | | |
| Type of Funding Total State Funds Remaining Funds Federal State (excluding the Local Other Total Project Costs Has this project prefered (yyyy-yy) s future funding likes. If yes, indicate new | amount of this requested for Fiscal Year 20 eviously received Amount of this requested for Fiscal Year 20 eviously received for Recurring | estion #6) Destion #6) | Amount 653,000 0 0 0 653,000 No Specific Appropriation # | Percentage 100% 0% 0% 0% 100% Vetoed | | |



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| 11. Details on how the requested state funds will be expended |
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| Spending Category | Description | Amount | | | | |
|---|--|---------|--|--|--|--|
| Administrative Costs: | | | | | | |
| Executive Director/Project Head Salary and Benefits | Executive Director | 75,000 | | | | |
| Other Salary and Benefits | Intake Specialist | 35,000 | | | | |
| Expense/Equipment/Travel/Supplies/Other | Phones, laptop, Internet, van payment | 12,000 | | | | |
| Consultants/Contracted Services/Study | Grant Management, Accountant | 25,000 | | | | |
| Operational Costs: Other | | | | | | |
| Salary and Benefits | Community Engagement Coordinator, Administrative Assistant | 65,000 | | | | |
| Expense/Equipment/Travel/Supplies/ Other | Suit package, entrepreneur boot camp, career trade boot camps, supplies, business/entrepreneur fieldtrips, weekly gas, conferences, bus passes, marketing, promotion, office, lease to own, utilities, insurance, van insurance, shelter, IDs or birth certificates, community events, food and supplies, phone, computers, software, workshops, workbooks, conventions, additional food truck, and supplies | 258,000 | | | | |
| Consultants/Contracted Services/Study | Accounting Business formation and credit repair for 100 participants Career trade boot camp facilitators Instructors | 38,000 | | | | |
| Fixed Capital Construction/Majo | r Renovation: | | | | | |
| Construction/Renovation/Land/ Planning Engineering | Renovations for business incubator | 145,000 | | | | |
| Total State Funds Requested (must equal total from question #6) | | | | | | |

12. Program Performance

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

Krumpin 4 Success has identified several career choices that have a great impact on our culture, society, economic sufficiency, and financial stability. The purpose of the program is to provide at-risk persons 16-24 in the community or who are incarcerated with entrepreneurship development and opportunity to learn a successful career trade.

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

Participants will receive individualize services plans and needs assessments during the intake process. Each plan includes service tasks that the participant must complete in one year. Some tasks are mandatory for all participants including life skills tasks, conflict resolution, and anger management tasks, job readiness, academic success, career or business track.

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

Other direct services: career trade boot camps, personal credit analysis and assistance, online nail tech and barbering school sponsorship, business licenses, basic needs (driver license, birth certificates, business attire, emergency shelter, and bus passes), technology assistance, business development support, substance abuse workshops, and workforce development trainings.

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

101-200 people

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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Mental health trainings, screenings, and awareness events. Inclusion activities and opportunities for autistic youth.

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?

Standard contract penalties are sufficient.

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.

Krumpin 4 Success owns the facility that will be renovated.



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| 14. | 14. Requestor Contact Information | | | | | | | | | |
|----------------------------------|-----------------------------------|----------------------------|--|-----------|--------|--|--|--|--|--|
| | a. First Name | Shanna | | Last Name | Carter | | | | | |
| | b. Organization | Krumpin 4 Success Inc | | | | | | | | |
| | c. E-mail Address | shanna@krumpin4success.org | | | | | | | | |
| | d. Phone Number | (904)480-3434 Ext. | | | | | | | | |
| 15. | 15. Recipient Contact Information | | | | | | | | | |
| | a. Organization | | | | | | | | | |
| b. Municipality and County Duval | | | | | | | | | | |
| | c. Organization Type | | | | | | | | | |
| | □For Profit Entity | y | | | | | | | | |
| | □Non Profit 501(c | ofit 501(c)(3) | | | | | | | | |
| | □Non Profit 501(c)(4) | | | | | | | | | |
| | ☑Local Entity | | | | | | | | | |
| | □University or College | | | | | | | | | |
| | □Other (please specify) | | | | | | | | | |
| | d. First Name | Shanna | | Last Name | Carter | | | | | |
| | e. E-mail Address | shanna@krumpin4success.org | | | | | | | | |
| | f. Phone Number | (904)480-3434 | | | | | | | | |
| 16. Lobbyist Contact Information | | | | | | | | | | |
| | a. Name | None | | | | | | | | |
| | b. Firm Name | None | | | | | | | | |
| | c. E-mail Address | s | | | | | | | | |
| | d. Phone Number | | | | | | | | | |