

# The Florida Senate Local Funding Initiative Request Fiscal Year 2024-2025

**LFIR # 2115** 

•	Recurring Nonrecurring  kely to be requested?  onrecurring amount per year.	No		
	Nonrecurring Nonrecurring			
	Necurring Nonrecurring			
	Amount Nonrecurring	Specific Appropriation #	Vetoed	
. Has this project pre	eviously received state funding?	No		
<b>Total Project Costs</b>	for Fiscal Year 2024-2025	250,000	100%	
Other		0	0%	
Local		0	0%	
	amount of this request)	0	0%	
Federal		0	0%	
Matching Funds	equested (from question #6)	250,000	100%	
Type of Funding	equested (from question #6)	Amount	Percentage	
Total Project Cost f	or Fiscal Year 2024-2025 (including	g matching funds avail	able for this projec	et)
Total State Funds F	Requested		250,000	
Fixed Capital Outlay		0		
Operations			250,000	
Type of Funding		Amou	ınt	
Amount of the Noni	ecurring Request for Fiscal Year 2	024-2025		
State Agency conta		nent of Education		
and trauma experier	nced by having a parent incarcerated.	nent of Education	ered due to the brea	iking up of their fan
university, college of statewide 501(C)3 n	r high school seniors who are children r vocational school or program. The pon- on-profit that focuses on the promotio to achieve, breaking through any disa	rogram is to be adminis on of Dr. King's legacy a	tered by the Dream and serving families t	Foundation, a to make sure youth
. Project/Program De	escription			
. Date of Request	12/18/2023			
	Keith Perry			
. Senate Sponsor				



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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**

<ol> <li>Status of Constru         a. What is the curr     </li> </ol>		he project?			
Planning	O Design	Construction	∙ N/A		
b. Is the project "s	shovel ready"	(i.e permitted)?			
c. What is the esti	mated start da	ate of construction?			
d. What is the esti	mated comple	etion date of construc	tion?		
		o receive, directly or i		xed capital outl	ay funding. Include the

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

Spending Category	Description	Amount		
Administrative Costs:				
Executive Director/Project Head Salary and Benefits	Program will be overseen by scholarship committee, The Dream Foundations Management firm and Executive Director, but with no salary as the management firm founded by the same is providing service and securing resources for such cost.	0		
Other Salary and Benefits	Will have additional part-time staff.	5,000		
Expense/Equipment/Travel/Supplies/ Other	Will need to travel, build partnerships, attend events to discuss program and recruit participants as well as partners. This will require a travel budget for a statewide program in such a large state.	8,000		
Consultants/Contracted Services/Study	Program will be overseen by The Dream Foundation management firm DCA and its CPA.	10,000		
Operational Costs: Other				
Salary and Benefits		0		
xpense/Equipment/Travel/Supplies/ For print material, postage, website and all communications		7,000		
Consultants/Contracted Services/Study	Direct Scholarship awards ranging from \$1000-\$1200, to be determined through an application reviewed by the Dream Foundation Grant Committee to include representatives from Living Stones International and other leading organizations.	220,000		
Fixed Capital Construction/Majo	r Renovation:			
Construction/Renovation/Land/ Planning Engineering		0		
Total State Funds Requested (must equal total from question #6)				

#### 14. Program Performance

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



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Provide scholarships to students statewide to attend a college, university or vocational school (or program) in Florida to have the scholarship program be more than a check, but also give them other support to make sure that they can succeed.

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

Have scholarship review committee create and provide scholarship application form and let school systems and organizations serving this population know about the scholarship to encourage seniors to apply.

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

Scholarships that go directly to state higher educational institutions, partner each student with mentors and counselors to help them succeed at completing the education they desire to be productive citizens.

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

Young men and women in traditional school environments as well as those in alternative school environments who may have an incarcerated parent or guardian. We would like to serve between 200-240 high school seniors statewide by providing scholarships and wrap around services to help them be successful ... and will also include some matching dollars from the sales of the "Live The Dream" license plate.

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

To have high school seniors with incarcerated parents are guardians participate in a program that puts them onto a college or vocational tract and provide the wrap around services that will help them finish with a degree or certificate... and assist them with jobs if needed. Once they are in the program, they will be mentored and monitored all the way to assure their success. The outcome will be measured by graduation and completion rates of the students being served in the program.

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?

A halting of distributions to the Dream Foundations scholarship program for high school seniors with incarcerated parents or guardians program if deliverables are not provided.

15. Requester Contact Information							
	a. First Name	Michael		Last Name	Dobson		
	b. Organization	The Drea	The Dream Foundation				
	c. E-mail Address	Michael@	Michael@livethedreamfoundation.org				
	d. Phone Number	(850)241	-5896	Ext.			
16.	16. Recipient Contact Information						
a. Organization The Dream Foundation							
b. Municipality and County Statewide							
	c. Organization Type						
	□For Profit Entity						
	☑Non Profit 501(c)(3)						
	□Non Profit 501(c	c)(4)					
	□Local Entity						



17.

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□University or College						
□Other (please specify)						
d. First Name	Michael	Last Name	Dobson			
e. E-mail Address	Michael@livethedreamfor	undation.org				
f. Phone Number	(850)241-5896					
Lobbyist Contact I	nformation					
a. Name	None					
b. Firm Name						
c. E-mail Address						
d. Phone Number						