

1. Project Title

Yes

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

Explicit Instruction for Emergent Bilingual Students--Osceola County

LFIR # 3259

| 2. Senate Sponsor | Victor Torres | | | | |
|---|--|--|---|---|--|
| 3. Date of Request | 01/09/2024 | | | | |
| 4. Project/Program D | escription | | | | |
| teacher-led instruct conversations. Implused to purchase m subjects of math, so | s funding is to support eme ion and ongoing progress roving language acquisition aterials aligned to WIDA Ecience, social studies, and orting this unique population | monitoring to will lead to l LD standard general knov | accélerate language petter academic outco s which integrate spe | acquisition through omes across the boat taking, listening, and | academic ard. Funding should be d grammar in the |
| 5. State Agency to re | ceive requested funds | Departm | ent of Education | | |
| State Agency cont | acted? No | | | | |
| 6. Amount of the Non | recurring Request for Fis | scal Year 20 | 24-2025 | | |
| Type of Funding | | | Amo | uint | |
| Operations | | | Amo | 500,000 | |
| Fixed Capital Outla | V | | | 0 | |
| Total State Funds | | | | 500,000 | |
| Type of Funding | for Fiscal Year 2024-2025 | , (including | Amount | Percentage | |
| Total State Funds Requested (from question #6) | | [‡] 6) | 500,000 | 100% | |
| Matching Funds | | , | | | |
| Federal | | | 0 | 0% | |
| State (excluding the | e amount of this request) | | 0 | 0% | |
| Local | · · · · · · · · · · · · · · · · · · · | | 0 | 0% | |
| Other | | | 0 | 0% | |
| Total Project Cost | s for Fiscal Year 2024-202 | 25 | 500,000 | 100% | |
| 8. Has this project pr | eviously received state for | unding? | No | | |
| Fiscal Year Amount | | | Specific Appropriation # | Vetoed | |
| (уууу-уу) | Recurring Non | recurring | Appropriation # | | |
| | | | | | |
| 9. Is future funding li | kely to be requested? | | No | | |
| a. If yes, indicate r | nonrecurring amount per | vear. | | | |
| • | | - | iou of state funding | , | I |
| b. Describe the SO | urce of funding that can | ne usea iii ii | eu oi state funding. | | 1 |
| | | | | | |
| 10. Has the entity rec | questing this project rece | ived any fed | deral assistance rela | ated to the COVID- | 19 pandemic? |



11. Status of Construction

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

School districts received funding in multiple phases from FLDOE through ESSER and CARE as part of the federal emergency pandemic funding plan.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

| á | a. What is the cui | rrent phase of t | he project? | | | | |
|-----|----------------------------------|-------------------------------------|--|--------------------------|---------------------|-----------------|-------------|
| | Planning | Design | Construction | O N/A | | | |
| k | o. Is the project " | shovel ready" (| i.e permitted)? | | | | |
| (| c. What is the est | imated start da | te of construction? | | | | |
| C | d. What is the est | timated comple | tion date of constru | ction? | | | |
| 12. | List the owners relationship bet | of the facility to ween the owne | o receive, directly or rs of the facility and | indirectly the entity | , any fixed capital | outlay 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 | | 0 |
| Other Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/ Other | | 0 |
| Consultants/Contracted Services/Study | | 0 |
| Operational Costs: Other | | |
| Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/ Other | | 0 |
| Consultants/Contracted Services/Study | Districts will use funds to purchase materials aligned to WIDA ELD standards, which integrate speaking, listening, and grammar in the subjects of math, science, social studies, and general knowledge, with the goal of increasing academic language acquisition to support students' overall academic achievement. | 500,000 |
| 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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Support emergent bilinguals by combining independent, student-driven learning with teacher-led instruction and ongoing progress monitoring to accelerate language acquisition through academic conversations. Improving language acquisition will lead to better academic outcomes across the board. Funding should be used to purchase materials aligned to WIDA ELD standards which integrate speaking, listening, and grammar in the subjects of math, science, social studies, and general knowledge.

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

This curriculum integrates speaking, listening, and grammar in the subjects of math, science, social studies, and general knowledge. The language learning technology supports an individualized learning path based on student skill and proficiency level. Speech-recognition technology in the platform allows daily opportunities learn and practice oral English.

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

District will support emergent bilinguals by providing independent, student-driven learning combined with teacher-led instruction and ongoing progress monitoring to accelerate language acquisition via an adaptive blended learning supplemental curriculum aligned to WIDA ELD standards. Access to this program will improve academic learning outcomes for emergent bilingual students.

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

English Language Learners (which is a state- and federally- defined category) within the district. Will serve approximately 5,000 new students (i.e. this will not supplement any currently funded programs).

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

Increase in English language acquisition, as well as increased learning in all academic areas, including reading, writing, math, science, and social studies. This will be measured through ACCESS for ELLs, Florida Assessment for Student Thinking (FAST), end of course assessments, and district benchmark assessments.

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?

Districts that fail to meet deliverables shall return all funding to the Department of Education and may forfeit funding for this purpose in the future.

| 15. Requester Contact | t Informat | ion | _ | | | |
|------------------------------------|--|------------------------------|-----------|---------|--|--|
| a. First Name | Jon | | Last Name | Hummell | | |
| b. Organization | Lexia Lea | arning | | | | |
| c. E-mail Address | jon.humn | jon.hummel@lexialearning.com | | | | |
| d. Phone Number | (785)409 | -8836 | Ext. | | | |
| 16. Recipient Contact | 16. Recipient Contact Information | | | | | |
| a. Organization | Organization School District of Osceola County | | | | | |
| b. Municipality and County Osceola | | | | | | |
| c. Organization Type | | | | | | |
| □For Profit Entity | | | | | | |
| □Non Profit 501(d | c)(3) | | | | | |
| □Non Profit 501(d | c)(4) | | | | | |
| | | | | | | |



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| ☑Local Entity | | | | | | |
|----------------------------------|-------------------------------------|-----------|----------|--|--|--|
| □University or Co | □University or College | | | | | |
| □Other (please sp | pecify) | | | | | |
| d. First Name | Valerie | Last Name | Martinez | | | |
| e. E-mail Address | valerie.martinez@osceolaschools.net | | | | | |
| f. Phone Number | (407)870-4848 | | | | | |
| 17. Lobbyist Contact Information | | | | | | |
| a. Name | None | | | | | |
| b. Firm Name | | | | | | |
| c. E-mail Address | | | | | | |
| d. Phone Number | | | | | | |