

1. Project Title

The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

New College of Florida - Dormitory Remediation

LFIR # 1134

| . Senate Sponsor | Jim Boyd | | | | |
|--|--|--|--|---|---------------------------------------|
| . Date of Request | 2/10/2025 | | | | |
| . Project/Program De | escription | | | | |
| NCF is requesting t appropriated for dorn housing crisis. | hat the funding appi mitory remediation a | ropriated in Specifi as NCF is currently | c Appropriation 18, ch experiencing historic | . 2023-239, L.O.F. student enrollment | be reverted and r growth and a stu |
| . State Agency to red | ceive requested fu | nds Board of | Governors | | |
| State Agency conta | acted? Yes | | | | |
| | | for Figure Very 00 | 05 0000 | | |
| Amount of the Noni | recurring Request | tor Fiscal Year 20 | 25-2026 | | 1 |
| Type of Funding | | | Amo | unt | |
| Operating | | | | 0 | |
| | | | | 5,882,388 | |
| Fixed Capital Outlay | | | | | |
| Total State Funds I | Requested | 5-2026 (including | matching funds avai | 5,882,388 ilable for this proje | • |
| Total State Funds I Total Project Cost f Type of Funding | Requested or Fiscal Year 202 | , , | Amount | ilable for this proje | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R | Requested or Fiscal Year 202 | , , | | ilable for this proj | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds | Requested or Fiscal Year 202 | , , | Amount 5,882,388 | ilable for this proje Percentage 100% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal | Requested or Fiscal Year 2029 equested (from que | stion #6) | Amount 5,882,388 | ilable for this proje Percentage 100% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the | Requested or Fiscal Year 2029 equested (from que | stion #6) | Amount 5,882,388 | Percentage 100% 0% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local | Requested or Fiscal Year 2029 equested (from que | stion #6) | Amount 5,882,388 0 0 0 | Percentage 100% 0% 0% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other | requested or Fiscal Year 2029 equested (from que amount of this requested) | estion #6) | Amount 5,882,388 0 0 0 0 | Percentage 100% 0% 0% 0% 0% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local | requested or Fiscal Year 2029 equested (from que amount of this requested) | estion #6) | Amount 5,882,388 0 0 0 | Percentage 100% 0% 0% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs | Requested for Fiscal Year 2029 equested (from que amount of this requested) | estion #6) | Amount 5,882,388 0 0 0 0 | Percentage 100% 0% 0% 0% 0% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other | equested equested (from que amount of this requested (from preceived services) | estion #6) Destion #6) Destion #6) Destion #6) | Amount 5,882,388 0 0 0 5,882,388 | Percentage 100% 0% 0% 0% 0% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profif yes, provide the | equested equested (from que amount of this requested (from que amount of this requested (from que) eviously received services and the services for Fiscal Year 20 | estion #6) Destion #6) Destion #6) Destion #6) Destion #6) Destion #6) | Amount 5,882,388 0 0 0 5,882,388 Yes | Percentage 100% 0% 0% 0% 100% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project present | Requested for Fiscal Year 2029 equested (from que amount of this requested Year 20 eviously received seviously received seviou | estion #6) Destion #6) Destion #6) Destion #6) Destion #6) Destion #6) | Amount 5,882,388 0 0 0 5,882,388 | Percentage 100% 0% 0% 0% 0% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profif yes, provide the fiscal Year (yyyy-yy) | equested equested (from que amount of this requested (from que amount of this requested (from que) eviously received services and the services for Fiscal Year 20 | nest) 25-2026 State funding? ace: bunt Nonrecurring | Amount 5,882,388 0 0 0 5,882,388 Yes Specific Appropriation # | Percentage 100% 0% 0% 0% 100% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profif yes, provide the I Fiscal Year (yyyy-yy) 2024-25 | equested equested (from que equested (from que amount of this requested (from que eviously received services recent instantantal | estion #6) Destion #6) | Amount 5,882,388 0 0 0 5,882,388 Yes Specific Appropriation # | Percentage 100% 0% 0% 0% 100% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profif yes, provide the fiscal Year (yyyy-yy) 2024-25 | equested equested (from que equested (from que amount of this requested (from que eviously received services for Fiscal Year 20 eviously received services from the following from the f | stion #6) Destion | Amount 5,882,388 0 0 0 5,882,388 Yes Specific Appropriation # | Percentage 100% 0% 0% 0% 100% | • |
| Total State Funds I Total Project Cost f Type of Funding Total State Funds R Matching Funds Federal State (excluding the Local Other Total Project Costs Has this project profif yes, provide the r Fiscal Year (yyyy-yy) 2024-25 Is future-year funding a. If yes, indicate n | equested for Fiscal Year 2029 equested (from que amount of this requested (from que) amount of this requested (from | stion #6) Destion | Amount 5,882,388 0 0 0 5,882,388 Yes Specific Appropriation # | Percentage 100% 0% 0% 0% 100% | • |

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction



1

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| | • | • • | | |
|-------------------|----------------------|---------------------------------|-----------------|--------------------------------|
| Planning | O Design | | | |
| b. Is the project | "shovel ready" (| (i.e permitted)? | Yes | |
| c. What is the es | stimated start da | te of construction? | 08/01/2025 | |
| d. What is the e | stimated comple | tion date of construction? | 06/30/2026 | |
| _ | stream will be u | sed for ongoing operations | and maintenance | e of the project? |
| Bonds or debt | | | | |
| | s of the facility to | o receive, directly or indirec | | ital outlay funding. Include t |
| | | rs of the facility and the enti | ty. | |

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

a. What is the current phase of the project?

| 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 | | |
| Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/ Other | | 0 |
| Consultants/Contracted Services/Study | | 0 |
| Fixed Capital Construction/Majo | r Renovation: | |
| Construction/Renovation/Land/ Planning Engineering | Funds will be used to renovate the dorms in decline including deferred maintenance of buildings, preventing further water intrusion, air conditioner replacement, etc. to add student spaces, classrooms and office space critically needed due to the rapid growth. | 5,882,388 |
| Total State Funds Requested (m | ust equal total from question #6) | 5,882,388 |

13. Program Performance

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

NCF will use the funding to remediate dormitory space that is currently not usable for student housing.

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

Funds will be used to renovate the dorms in decline including deferred maintenance of buildings, preventing further water intrusion, air conditioner replacement, etc. to add student spaces, classrooms and office space critically needed due to the rapid growth.

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



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| | Improved conditions on campus. |
|--------|---|
| C | d. Who is the target population served by this project? How many individuals are expected to be served? |
| | Students, faculty, staff and community. Over 1000 will be served by receipt of this funding. |
| | e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured? |
| | Improve the safety and conditions for students, faculty, staff and community. |
| | . What are the suggested penalties that the contracting agency may consider in addition to its standard penalties or failing to meet deliverables or performance measures provided for in the contract? |
| | No future funding received. |
| 14. Is | s this project related to mitigation, response, or recovery from a natural disaster? No |
| a. | If Yes, what phase best describes the project? |
| | Mitigation (reducing or eliminating potential loss of life or property) |
| | Response (addressing the immediate and short-term effects of a natural disaster) |
| | Recovery (assisting communities return to normal operations, including rebuilding damaged infastructure) |
| b. | Name of the natural disaster (or Executive Order # for events not under a federal declaration): |
| | |
| 15. F | las the entity applied for or received federal assistance for this project? |
| | ☐ Yes, Applied |
| | ☐ Yes, Received |
| | ⊒ No |
| | ☐ No, but intends to apply |
| a. | If yes, provide the FEMA project worksheet ID#: |
| | |
| b. | Provide the total project cost listed on the FEMA project worksheet: |
| 16. F | las the entity applied for or received state assistance for this project (other than this request)? |
| | ☐ Yes, Applied |
| | ☐ Yes, Received |
| | □ No |
| | □ No, but intends to apply |
| | If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of ommerce): |



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| . Requester Contact | t Informat | ion | - 1 | | |
|----------------------|------------|------------------|-----------|----------|--|
| a. First Name | Richard | | Last Name | Corcoran | |
| b. Organization | New Coll | ege of Florida | | | |
| c. E-mail Address | president | tsoffice@ncf.edu | | | |
| d. Phone Number | (941)487 | -4443 | Ext. | | |
| | | | | | |
| . Recipient Contact | Informati | on | | | |
| a. Organization | New Coll | ege of Florida | | | |
| b. Municipality and | d County | Sarasota | | | |
| c. Organization Ty | pe | | | | |
| □For Profit Entity | | | | | |
| □Non Profit 501(d | c)(3) | | | | |
| □Non Profit 501(d | c)(4) | | | | |
| □Local Entity | | | | | |
| ☑University or Co | llege | | | | |
| □Other (please sp | pecify) | | | | |
| d. First Name | Richard | | Last Name | Corcoran | |
| e. E-mail Address | president | tsoffice@ncf.edu | | | |
| f. Phone Number | (941)487 | -4443 | Ext. | | |
| . Lobbyist Contact I | nformatio | on | | | |
| a. Name | Allyce C | Heflin | | | |
| b. Firm Name | | | | | |
| c. E-mail Address | aheflin@ | ncf.edu | | | |
| d. Phone Number | (850)671 | -4401 | | | |

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.