

LFIR # 1000

1. Project Title	Research Facility		rofessions Clinical Tr	aning and		
2. Senate Sponsor	Lori Berman					
3. Date of Request	10/6/2025					
4. Project/Program De	escription					
educational and rese enrollment expansion maintain accreditation collaborations with o Professions Clinical	earch space for all hen in the College of Non standards. This father colleges and paraining and Resea	nealth profession stu Medicine, we will red acility will support cl rovide simulation sp arch Facility is uniqu	Training and Researd udies majors at FAU. quire additional clinica ass expansion, expanaces and interprofesse in that it will serve a side-by-side clinical expansion.	As the university of all and instructional and opportunities for sional education action are a variety of health processions.	ontinues its space in order to research, increase ctivities. The Health	
5. State Agency to rec			Governors			
State Agency conta	•					
.						
6. Amount of the Nonr	ecurring Request	for Fiscal Year 202	26-2027			
Type of Funding			Amo	unt		
			0			
Operating					1	
Operating Fixed Capital Outlay				70,000,000		
					1	
Fixed Capital Outlay	Requested	6-2027 (including r	matching funds avai	70,000,000 70,000,000		
Fixed Capital Outlay Total State Funds F	Requested	6-2027 (including r	natching funds avai	70,000,000 70,000,000		
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Re	Requested or Fiscal Year 2020			70,000,000 70,000,000 lable for this proj		
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding	Requested or Fiscal Year 2020		Amount	70,000,000 70,000,000 ilable for this proj		
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds Federal	Requested or Fiscal Year 2020 equested (from que	estion #6)	Amount	70,000,000 70,000,000 ilable for this proj Percentage 100%		
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds	Requested or Fiscal Year 2020 equested (from que	estion #6)	Amount 70,000,000 0	70,000,000 70,000,000 flable for this proj Percentage 100% 0%		
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Romatching Funds Federal State (excluding the Local	Requested or Fiscal Year 2020 equested (from que	estion #6)	70,000,000 0 0	70,000,000 70,000,000 flable for this project Percentage 100% 0% 0% 0%		
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds Federal State (excluding the	Requested or Fiscal Year 2020 equested (from que	estion #6)	Amount 70,000,000 0	70,000,000 70,000,000 flable for this proj Percentage 100% 0%		
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Romatching Funds Federal State (excluding the Local	Requested or Fiscal Year 2020 equested (from que amount of this requ	estion #6)	70,000,000 0 0	70,000,000 70,000,000 flable for this project Percentage 100% 0% 0% 0%	ect)	
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Re Matching Funds Federal State (excluding the Local Other	Requested or Fiscal Year 2020 equested (from que amount of this requested) for Fiscal Year 20	estion #6) uest) 226-2027 state funding?	Amount 70,000,000 0 0 0 0	70,000,000 70,000,000 70,000,000 Percentage 100% 0% 0% 0%	ect)	
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project preference of the remark of the re	Requested or Fiscal Year 2020 equested (from que amount of this requested) for Fiscal Year 20	pestion #6) puest) puest) puest) puest	Amount 70,000,000 0 0 0 70,000,000 Yes Specific	70,000,000 70,000,000 70,000,000 Percentage 100% 0% 0% 0%	ect)	
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project present the remark of the remark o	equested equested (from que amount of this requested (from from que amount of this requested (from from que) eviously received (from from que)	pestion #6) puest) puest) puest) puest	Amount 70,000,000 0 0 0 70,000,000 Yes	70,000,000 70,000,000 70,000,000 flable for this projection Percentage 100% 0% 0% 0% 100%	ect)	
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project preference of the remark of the re	Requested or Fiscal Year 2020 equested (from que amount of this requested Year 20 eviously received sometimes and the content of the content	pestion #6) puest) puest) puest p	Amount 70,000,000 0 0 0 70,000,000 Yes Specific	70,000,000 70,000,000 70,000,000 flable for this projection Percentage 100% 0% 0% 0% 100%	ect)	
Fixed Capital Outlay Total State Funds F 7. Total Project Cost for Type of Funding Total State Funds Remark Matching Funds Federal State (excluding the Local Other Total Project Costs 8. Has this project predict of the remark of the remar	equested or Fiscal Year 2026 equested (from que amount of this requested (from que amount of this requested serviously received services and services services and services servi	estion #6) Destion #6) Destio	Amount 70,000,000 0 0 0 70,000,000 Yes Specific Appropriation #	70,000,000 70,000,000 70,000,000 flable for this projection Percentage 100% 0% 0% 0% 100%	ect)	



LFIR # 1000

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10.	Status of Const	truction				
	a. What is the c	urrent phase of t	he project?			
	Planning	O Design	Construction	N/A		
	b. Is the project	"shovel ready" (i.e permitted)?	No		
	c. What is the e	stimated start da	te of construction?	09/01/2027		
	d. What is the e	stimated comple	tion date of construction	09/01/2029		
	e. What funding	stream will be u	sed for ongoing operation	ons and maintenance	of the project?	
	The University	has committed to	using Carryforward funds	for the ongoing operation	ons and maintenance	of this project.
11	. List the owner relationship be	s of the facility to	o receive, directly or indi	rectly, any fixed capit entity.	al outlay funding. In	clude the
	Florida Atlantic	University				
12.	Details on how	the requested st	ate funds will be expend	ed		

12

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/Major Renovation:				
Construction/Renovation/Land/ Planning Engineering	Engineering and construction of building	70,000,000		
Total State Funds Requested (must equal total from question #6) 70,000,000				

13. Program Performance

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

This 150,000 gsf facility located on the Boca Raton campus will blend experiential learning for health professions trainees with patient engagement and patient-oriented research. All colleges with health professions majors or programs at Florida Atlantic University, including nursing, medicine, engineering, science, education, business, social work and arts and letters, will be able to expand their ability to train the needed workforce in an interprofessional environment and the facility will allow the colleges to expand their annual enrollment and number of graduates.

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



LFIR # 1000

Resident training programs will expand to address the doctor shortage. Cross-disciplinary training in technology, engineering, business and data science will ensure that the workforce of tomorrow has the necessary skills to serve the community's needs. Ultimately, this state-of-the-art facility will provide a workforce pipeline of health-related professionals for South Florida to allow for the data-driven delivery of healthcare in the region.

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

The facility will be utilized to train future doctors, nurses, social workers and other health professionals. It will include an anatomy lab, simulation space, study spaces, as well as interprofessional education activities and expanded opportunities for research and collaboration with other colleges. The facility is unique in that it will serve all Colleges with health professions programs at Florida Atlantic University.

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

All students studying healthcare profession majors at Florida Atlantic University will have the opportunity to learn and train in this facility. These students will then go on to serve the neighboring communities, including but not limited to Florida Atlantic's immediate service area, which includes more than 3.2 million residents.

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

In addition to the immediate economic opportunities associated with constructing a 150,000 square foot facility on the Boca Raton campus, the building would also serve as a clinical and educational space for future doctors, nurses, social workers, engineers and more. The requested \$70 million from the Legislature, plus the university's commitment to secure the remaining funds in philanthrophic donations, will allow FAU to complete construction.

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 in the contract?

	If Florida Atlantic University does not accomplish the plan as proposed, the state of Florida may recall funds associated with this request.
14.	Is this project related to mitigation, response, or recovery from a natural disaster? No
а	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)
k 「	b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):
1 5 .	Has the entity applied for or received federal assistance for this project?
	☐ Yes, Applied
	☐ Yes, Received
	□ No
	□ No. but intends to apply

b. Provide the total project cost listed on the FEMA project worksheet:

a. If yes, provide the FEMA project worksheet ID#:



LFIR # 1000

6. Has the entity app	lied for or received s	tate assistance f	or this project (other than
☐ Yes, Applied				
☐ Yes, Received				
□ No				
☐ No, but intends to	o apply			
a. If yes, specify the Commerce):	e program and state	agency (ex. Loca	l Government E	mergency
7. Requester Contact	t Information			
a. First Name	Camila	Last Name	Mychalczuk	
b. Organization	Florida Atlantic Unive		•	
c. E-mail Address	cmychalczuk@fau.ec	du		
d. Phone Number	(561)405-5054	Ext.		
B. Recipient Contact				
a. Organization	Florida Atlantic Unive	ersity		
b. Municipality and	d County Palm Bead	ch		
c. Organization Ty	pe			
□For Profit Entity				
□Non Profit 501(d	c)(3)			
□Non Profit 501(d	c)(4)			
□Local Entity				
☑University or Co	allege			
•				
□Other (please sp	pecify)			
d. First Name	Adam	Last Name	Hasner	
e. E-mail Address	ahasner@fau.edu			
f. Phone Number	(561)350-6116	Ext.		
). Lobbyist Contact I	nformation			
a. Name	Mathew Forrest			
b. Firm Name	Ballard Partners			



LFIR # 1000

c. E-mail Address	mat@ballardpartners.com	
d. Phone Number	(561)253-3232	

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