

LFIR # 1364

1.	Project Title	Florida Institute of	Technology A	dvanced Composite Ed	luipment	
2.	Senate Sponsor	Debbie Mayfield				
3.	Date of Request	11/19/2025				
4.	Project/Program De	escription				
	prototyping, develop Florida Tech to provi	ment, and test with the	ne installation on ng and labs for	lize capabilities for adva of advanced equipment r composite skills as we applications.	and sensors. These	capabilities will allow
5.	State Agency to rec	ceive requested fund	ds Depa	rtment of Education		
	State Agency conta	-	•			
6.	Amount of the Nonr	ecurring Request to	or Fiscal Year	2026-2027		
	Type of Funding			Am	ount	
	Operating				2,700,000	
	Fixed Capital Outlay				0	
	Total State Funds F	Requested			2,700,000	
7.	Total Project Cost fo	or Fiscal Year 2026-	2027 (includi	ng matching funds av	ailable for this proj	ect)
	Type of Funding			Amount	Percentage	
		equested (from quest	tion #6)	2,700,000	100%	
	Matching Funds				I	
	Federal			(
	`	amount of this reque	st)	(
	Local			(
	Other			(
	Total Project Costs	for Fiscal Year 202	6-2027	2,700,000	100%	
8.						
٠.	Has this project pre If yes, provide the r	eviously received st most recent instanc	•	No		
J.	If yes, provide the r	•	e:	Specific	Vetoed	
J.	If yes, provide the r	most recent instanc	e:	Specific Appropriation #	Vetoed	
-	If yes, provide the r	most recent instanc	e: int	Specific Appropriation #	Vetoed	
	Fiscal Year (yyyy-yy) Is future-year fundia. If yes, indicate no	Amou Recurring ng likely to be reque	e: Nonrecurring ested? t per year.	Specific Appropriation #		



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10. Status of Construction

The Florida Senate Local Funding Initiative Request Fiscal Year 2026-2027

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а	. What is the cur	rent phase of th	e project?				
	Planning	O Design	Construction	O N/A			
b	. Is the project "	shovel ready" (i.	e permitted)?				
C	. What is the esti	imated start date	e of construction?				
C	l. What is the est	imated completi	on date of constru	ction?			
е	. What funding s	tream will be us	ed for ongoing ope	rations a	nd maintenance of	the project?	
1.			receive, directly or s of the facility and			outlay funding. Include	the

12. 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		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Advanced materials development equipment to include advanced composites and sensors	2,700,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major	or Renovation:	
Construction/Renovation/Land/ Planning Engineering		0
Total State Funds Requested (m	nust equal total from question #6)	2,700,000

13. Program Performance

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

The advanced equipment and sensors requested are necessary to fully operationalize capabilities for advanced materials development training, prototyping, development, and test at the Florida Institute of Technology. These capabilities will allow Florida Tech to provide certification training and labs for composite skills as well as support to Florida industry cluster product development to include aerospace and marine applications.

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



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Florida has a shortage of composite workforce and project capacity for prototyping production. Composite materials familiarization and skill training are slated to be provided to industry workforce and students. Advanced composite prototyping and testing with industry partners to advance "Stay in Florida" efficiencies and competitiveness in the marketplace will be available.

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

Providing students and workforce in aerospace and other industry related disciplines exposure to advanced composite skill sets demanded by industry. Direct services will include providing hands-on training and hands-on prototyping and test for project work..

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

Florida aerospace and other industry workforce cohorts requiring advanced composite training including University/College Students.

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

Introduction of advanced materials composite fabrication and test techniques for workforce and multi-disciplinary engineering students. Innovation and product development partnerships, introduction and training of workforce groups, students and companies to fill shortage in advanced composites skill sets. Measurements will include workforce groups, students, faculty and companies accessing and utilizing equipment as well as increasing the number of industry workforce, students, faculty and partners exposed to advanced composite training methods.

	or failing to meet deliverables or performance measures provided for in the contract? Standard contract provisions.
	s this project related to mitigation, response, or recovery from a natural disaster? No
	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. I	Name of the natural disaster (or Executive Order # for events not under a federal declaration):
5. Ha	as the entity applied for or received federal assistance for this project?
	I Yes, Applied
	I Yes, Received
	l No
	No, but intends to apply
a. I	If yes, provide the FEMA project worksheet ID#:

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



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16. Has the entity app	lied for o	r received state	assistance f	or this projec	ct (other tha	n this request)?	
☐ Yes, Applied							
☐ Yes, Received							
□ No							
☐ No, but intends to	o apply						
a. If yes, specify the	e progran	າ and state ager	ıcy (ex. Loca	al Governmen	nt Emergenc	y Bridge Loan, Department o	f
Commerce):							
17. Requester Contact	Informat	ion					
a. First Name	Robert		Last Name	Salonen			
b. Organization	Florida In	stitute of Techno	logy				
c. E-mail Address	RSalone	n@FIT.edu					
d. Phone Number	(321)501	-1900	Ext.				
49 Desirient Centest	Informati						
18. Recipient Contact a. Organization		nstitute of Techno	Joay				
b. Municipality and			nogy]		
c. Organization Ty		Diovaia			J		
□For Profit Entity	50						
□Non Profit 501(c	·)(3)						
`	, , ,						
□Non Profit 501(c	(4)						
□Local Entity							
☑University or Co	llege						
□Other (please sp	ecify)						
d. First Name	Robert		Last Name	Salonen			
e. E-mail Address	RSalone	n@FIT.edu					
f. Phone Number	(321)501	-1900	Ext.				
19. Lobbyist Contact I	nformatio	n					
a. Name	Scott L.	Ross					
b. Firm Name	Capital C	City Consulting LI	_C				
c. E-mail Address	scott@co	ccfla.com	<u> </u>				



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d. Phone Number	(850)222-9075

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