



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1405

1. Project Title Arc of South Florida - Culinary Training for Individuals with Disabilities and Mental Illness

2. Senate Sponsor Shevrin Jones

3. Date of Request 11/19/2025

4. Project/Program Description

The funds will support the operation of a comprehensive Culinary Vocational Training Program designed to equip participants with practical, employable skills in baking, food preparation, and restaurant maintenance. This program will offer paid, hands-on training opportunities that prepare individuals for sustainable careers in the culinary and hospitality industries, while also fostering economic growth and job readiness within the community.

5. State Agency to receive requested funds Department of Education

State Agency contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	956,194
Fixed Capital Outlay	0
Total State Funds Requested	956,194

7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	956,194	87%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	145,550	13%
Total Project Costs for Fiscal Year 2026-2027	1,101,744	100%

8. Has this project previously received state funding? No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		

9. Is future-year funding likely to be requested? Yes

a. If yes, indicate nonrecurring amount per year. 1,000,000

b. Describe the source of funding that can be used in lieu of state funding.

n/a

Complete questions 10 and 11 for Fixed Capital Outlay Projects



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10. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction ☐ N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Senior Program Director-Salary & Benefits	65,000
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Administration Cost @ 10%	85,000
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	2 Culinary Instructors (\$42,000 each) -4 Instructional Aides (\$35,360 each) 1 Administrative Assistant (\$35,360) FICA (\$27,234) Health Insurance (\$66,960). 25 clients 4 hours per day x 4 days a week x 47 weeks (\$188,000)	508,194
Expense/Equipment/Travel/Supplies/Other	Equipment and Supplies (\$150,000) Facility Rent & Utilities (\$116,000) Umbrella Insurance Policy (\$32,000)	298,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		956,194

13. Program Performance

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

The funds will support The Arc of South Florida Culinary Arts Program, providing hands-on culinary training for individuals with intellectual and developmental disabilities. This program will fund qualified instructors, staff benefits, facility rental, and equipment to teach food preparation, safety, and service skills. The goal is to prepare participants for employment, promote independence, and increase inclusion in the workforce.

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



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The funds will support activities and services including culinary, baking, and restaurant maintenance training in a professional kitchen, life skills and vocational development, supervised daily engagement, and behavioral support for adults with autism, developmental disabilities, and mental illness to enhance independence, employability, and overall well-being.

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

The funding requested will directly support services that empower citizens with autism, developmental disabilities, and mental illness. These services include life skills training, vocational development, employment readiness programs, and individualized support to foster independence, enhance daily living, and promote community integration.

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

The majority of the funds requested will serve 25–30 adults with autism, developmental disabilities, and mental illness. This includes individuals who are developmentally disabled, persons with poor mental health, and economically disadvantaged. Some participants may also be unemployed and in need of vocational training and life skills development.

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

The project will improve independence, life skills, vocational readiness, and well-being for adults with autism, developmental disabilities, and mental illness. Outcomes will be measured through pre- and post-assessments, program completion, employment tracking, and feedback from participants, families, and employers.

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?

There is no expected additional penalty if these services do not meet the requirements of the Agency. With over 50 years of service to the community, we deeply value all funding received and ensure it is appropriately distributed across our programs and services.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

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 infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has 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:



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16. Has 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

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- ☐ For Profit Entity
- ☒ Non Profit 501(c)(3)
- ☐ Non Profit 501(c)(4)
- ☐ Local Entity
- ☐ University or College
- ☐ Other (please specify)

d. First Name **Last Name**

e. E-mail Address

f. Phone Number **Ext.**

19. Lobbyist Contact Information

a. Name

b. Firm Name



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c. E-mail Address

d. Phone Number

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