2018-2019 Florida Job Growth Grant Fund
Workforce Training Grant Proposal

Proposal Instructions: The Florida Job Growth Grant Fund Proposal (this document) must be completed and signed by an authorized representative of the entity applying for the grant. Please read the proposal carefully as some questions may require a separate narrative to be completed. If additional space is needed, attach a word document with your entire answer.

Entity Information

Name of Entity: Collier County Public Schools

Federal Employer Identification Number (if applicable): [Redacted]

Primary Contact Name: Dorin Oxender
Title: Director, Immokalee Technical College
Mailing Address: 508 North 9th Street
Immokalee, FL 34142
Phone Number: 239-377-9900
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Secondary Contact Name: Aaron Paquette
Title: Assistant Director, Immokalee Technical College
Phone Number: 239-377-9900

Workforce Training Grant Eligibility

Pursuant to 228.101, F.S., the Florida Job Growth Grant Fund was created to promote economic opportunity by improving public infrastructure and enhancing workforce training. This includes workforce training grants to support programs offered at state colleges and state technical centers.

Eligible entities must submit proposals that:
• Support programs and associated equipment at state colleges and state technical centers.
• Provide participants with transferable and sustainable workforce skills applicable to more than a single employer.
• Are offered to the public.
• Are based on criteria established by the state colleges and state technical centers.
• Prohibit the exclusion of applicants who are unemployed or underemployed.
1. Program Requirements:
(If additional space is needed, attach a word document with your entire answer.)

Each proposal must include the following information describing how the program satisfies the eligibility requirements listed on page 1.

A. Provide the title and a detailed description of the proposed workforce training.
   New Technical College Branch Campus: iTECH Technical College Glades
   To allow for the creation of a new branch campus. See attached description.

B. Describe how this proposal supports programs at state colleges or state technical centers.
   This branch campus operates under the direct supervision of the Dept. of Education. See attached description.

C. Describe how this proposal provides participants transferable, sustainable workforce skills applicable to more than a single employer.
   Programs offered at the new center are on the targeted occupations list of four surrounding workforce regions. See attached description.

D. Describe how this proposal supports a program(s) that is offered to the public?
   The branch campus brings ten new post-secondary training opportunities to the public in the Heartland of Florida. See attached description.

E. Describe how this proposal is based on criteria established by the state colleges and state technical centers.
   Programming follows DOE frameworks offering state certificates and industry credentialing. See attached description.

F. Does this proposal support a program(s) that will not exclude unemployed or underemployed individuals?
   ☐ Yes   ☐ No
   This is a public, open access, post-secondary institution.
G. Describe how this proposal will promote economic opportunity by enhancing workforce training. Please include the number of program completers anticipated to be created from the proposed training. Further, please include the economic impact on the community, region, or state and the associated metrics used to measure the success of the proposed training.

The establishment of a branch campus in Moore Haven will most certainly promote economic opportunities and workforce training. See attached description.

2. Additional Information:
(If additional space is needed, attach a word document with your entire answer.)

A. Is this an expansion of an existing training program?  
   □ Yes  □ No
   If yes, please provide an explanation for how the funds from this grant will be used to enhance the existing program.

B. Does the proposal align with Florida’s Targeted Industries?  
   (View Florida’s Targeted Industries here.)  
   □ Yes  □ No
   If yes, please indicate the specific targeted industries with which the proposal aligns.
   If no, with which industries does the proposal align?
   Yes- Manufacturing and Professional Services. See description for details.

C. Does the proposal align with an occupation(s) on the Statewide Demand Occupations List and/or the Regional Demand Occupations List? (View Florida’s Demand Occupations List here.)  
   □ Yes  □ No
   If yes, please indicate the specific occupation(s) with which the proposal aligns.
   If no, with which occupation does the proposal align?
   All 10 programs being proposed are on the state and local targeted occupations list. See description for details.
D. Indicate how the training will be delivered (e.g., classroom-based, computer-based, other).
   If in-person, identify the location(s) (e.g., city, campus, etc.)
   where the training will be available.
   If computer-based, identify the targeted location(s) (e.g., city, county, statewide
   where the training will be available.

D. iTECH Glades will be taught in a traditional classroom and lab-based delivery model housed at the
   Glades Regional Training facility.

E. Indicate the number of anticipated annual enrolled students and completers in the proposed
   program.
   See attachment for description.

F. Indicate the length of program (e.g., quarters, semesters, weeks, etc.), including anticipated
   beginning and ending dates.

   Begin Date: Spring 19
   End Date: on-going

   See attachment for description.

G. Describe the plan to support the sustainability of the program after grant completion.

   Sustainability is based on continuing workforce funding to Collier County at 100% of instructional hours
   reported and the continued partnerships for use of space. See attached description.

H. Identify any certifications, degrees, etc. that will result from the completion of the program.
   Please include the Classification of Instructional Programs (CIP) code and the percent of
   completer in each code, corresponding with Section E.

   All programs offered at iTECH Glades are eligible for a PSAV Diploma upon completion along with
   industry certification and state licensure. See attachment for description.

I. Does this project have a local match amount?  ☐ Yes  ☐ No

   If yes, please describe the entity providing the match and the amount (Do not include in-kind).

   Several business have stated their willingness to provide additional equipment and curriculum support
   to assist in programing. The greatest support for this award is Glades County Board of Commissioners
   agreement for us to utilize the facility.
J. Provide any additional information or attachments to be considered for the proposal. 
Please see the overwhelming response in letters of support for this project, attached.

3. Program Budget
(If additional space is needed, attach a word document with your entire answer.)

Estimated Costs and Sources of Funding: Include all applicable workforce training costs and other funding sources available to support the proposal.

1.) Total Amount Requested $5,484,768
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2.) Other Workforce Training Project Funding Sources:
   City/County $678,000
   Private Sources $3,638,768
   Other (grants, etc.) $858,000
   Total Other Funding $5,484,768

3.) Workforce Training Project Costs:
   Equipment $678,000
   Personnel $3,638,768
   Facilities $858,000
   Tuition $60,000
   Training Materials $150,000
   Other $100,000
   Total Project Costs $5,484,768

Note: The total amount of the project should equal the total amount requested plus the total other funding.
4.) Provide a detailed budget narrative, including the timing and steps necessary to obtain the funding, how equipment purchases will be associated with the training program, if applicable, and any other pertinent budget-related information.

Please see attached description.

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4. Approvals and Authority
(If additional space is needed, attach a word document with your entire answer.)

A. If entity is awarded grant funds based on this proposal, what approvals must be obtained before it can execute a grant agreement with the Florida Department of Economic Opportunity (e.g., approval of a board, commission or council)?

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B. If approval of a board, commission, council or other group is needed prior to execution of an agreement between the entity and the Florida Department of Economic Opportunity:

i. Provide the schedule of upcoming meetings for the group for a period of at least six months.

ii. State whether entity is willing and able to hold special meetings, and if so, upon how many days’ notice.

N/A

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C. Attach evidence that the undersigned has all necessary authority to execute this proposal on behalf of the entity. This evidence may take a variety of forms, including but not limited to: a delegation of authority, citation to relevant laws or codes, policy documents, etc.
I, the undersigned, do hereby certify that I have express authority to sign this proposal on behalf of the above-described entity and to the best of my knowledge, that all data and information submitted in proposal is truthful and accurate and no material fact has been omitted.

Name of Entity: Collier County Public Schools

Name and Title of Authorized Representative: Dr. Kamela Patton, Superintendent

Representative Signature: [Signature]

Signature Date: 9-20-18