



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.

Entity Information

Name of Entity: Okaloosa Technical College

Federal Employer Identification Number (if applicable): ██████████

Contact Information:

Primary Contact Name: Carl Grimes

Title: Vocational and Career Advisor

Mailing Address: 1976 Lewis Turner Blvd.
Fort Walton Beach, Florida 32547

Phone Number: (850) 833-3500

Email: grimesc@mail.okaloosa.k12.fl.us

Workforce Training Grant Eligibility

Pursuant to 288.101, 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:

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.

See Attachment 1 for Word Document Narrative Answer

- B. Describe how this proposal supports programs at state colleges or state technical centers.

See Attachment 1 for Word Document Narrative Answer

- C. Describe how this proposal provides participants transferable, sustainable workforce skills applicable to more than a single employer.

See Attachment 1 for Word Document Narrative Answer

- D. Does this proposal support a program(s) that is offered to the public?

Yes No

- E. Describe how this proposal is based on criteria established by the state colleges and state technical centers.

See Attachment 1 for Word Document Narrative Answer

- F. Does this proposal support a program(s) that will not exclude unemployed or underemployed individuals?

Yes No



G. Describe how this proposal will promote economic opportunity by enhancing workforce training. Please include the number of jobs 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.

See Attachment 1 for Word Document Narrative Answer

2. Additional Information:

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.

See Attachment 1 for Word Document Narrative Answer

B. Does the proposal align with Florida’s Targeted Industries? (View Florida’s [Targeted Industries here.](#))

Yes No

If yes, please indicate the targeted industries with which the proposal aligns.

If no, with which industries does the proposal align?

See Attachment 1 for Word Document Narrative Answer

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 Occupation Lists here.](#))

Yes No

If yes, please indicate the occupation(s) with which the proposal aligns.

If no, with which occupation does the proposal align?

See Attachment 1 for Word Document Narrative Answer



I. Does this project have a local match amount?

Yes No

If yes, please describe the entity providing the match and the amount.

N/A

J. Provide any additional information or attachments to be considered for the proposal.

Please see Attachments 1-16 for additional information.

3. Program Budget

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

A. Workforce Training Project Costs:

Equipment	<u>\$ 255,055.96</u>		
Personnel	<u>\$ 77,400.00</u>		
Facilities	<u>\$ 291,716.00</u>		
Tuition	<u>\$ 245,846.40</u>		
Training Materials	<u>\$ 119,346.00</u>		
Other	<u>\$ 171,278.00</u>	Please Specify:	<u>Career S</u>
Total Project Costs	<u>\$ 1,160,642.36</u>		

B. Other Workforce Training Project Funding Sources:

City/County	<u>\$ 0</u>		
Private Sources	<u>\$ 0</u>		
Other (grants, etc.)	<u>\$ 0</u>	Please Specify:	<u>N/A</u>
Total Other Funding	<u>\$ 0</u>		

Total Amount Requested \$ 1,160,642.36

Note: The total amount requested must equal the difference between the workforce training project costs in 3.A. and the other workforce training project funding sources in 3.B.



- C. 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.

See Attachment 1 for Word Document Narrative Answer

4. Approvals and Authority

- 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)?

See Attachment 1 for Word Document Narrative Answer

- 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.

See Attachment 1 for Word Document Narrative Answer

- ii. State whether that group can hold special meetings, and if so, upon how many days' notice.

See Attachment 1 for Word Document Narrative Answer

- 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.

Name of Entity: Okaloosa Technical College

Name and Title of Authorized Representative: Jerry Sansom

Representative Signature: See attachment 14

Signature Date: 08/14/2017