# REQUEST FOR LEGISLATIVE ACTION

Completed by County Counselor's Office: Res/Qrd No.: 19092

Sponsor(s): Scott Burnett

Date:

February 29, 2016

SUBJECT	Action Requested  Resolution Ordinance  Project/Title: Request to partially rescind Resolution 1904 Economic Union with a Cooperative Agreement with aSTE allocated for the Black Economic Union, account 0037768-aSTEAM Village.	AM Village and to transfer t	ne funds currently
BUDGET INFORMATION To be completed By Requesting	Amount authorized by this legislation this fiscal year:	\$20,0	
Department and	Amount previously authorized this fiscal year:	\$20,0	
Finance	Total amount authorized after this legislative action:	\$20,0	
	Amount budgeted for this item * (including transfers):	\$20,0	00
# 1	Source of funding (name of fund) and account code number; FROM/TO:	TRANSFER FROM: 003 7768-56789 TO: 003 7776-56789	
PRIOR LEGISLATION	*If account includes additional funds for other expenses, total budgeted in OTHER FINANCIAL INFORMATION:  No budget impact (no fiscal note required) Term and Supply Contract (funds approved in the annua Department: Estimated Use: \$  Prior Year Budget (if applicable): Prior Year Actual Amount Spent (if applicable):  Prior ordinances and (date): Prior resolutions and (date): Resolution # 1904 \$\frac{3}{2}\$ 1/19/2016	al budget); estimated value a	nd use of contract:
CONTACT	RLA drafted by (name, title, & phone): Cindy Wallace – Au		
INFORMATION	Test dianed by (name, title, & phone). Chief wander - Addit Assistant 001 3512		
REQUEST SUMMARY	Partially Rescinding Resolution 1904 by replacing Black Economic Union with aSTEAM Village and transferring the funds originally allocated for BEU into account 003-7776-56789 for aSTEAM Village.		
CLEARANCE	<ul> <li>☐ Tax Clearance Completed (Purchasing &amp; Department)</li> <li>☐ Business License Verified (Purchasing &amp; Department)</li> <li>☐ Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</li> </ul>		
ATTACHMENTS	Agency Proposal		
REVIEW	Department Director: Chessa Woodersa		Date: 2.22.20 6
	Finance (Budget Approva): If applicable		Date: 2/2/16
	Division Manager:  Manyow Brown		Date: 2 24/14
	County Counselor's Office:		Date:

#### This expenditure was included in the annual budget. Funds for this were encumbered from the Fund in . There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized. Funds sufficient for this expenditure will be/were appropriated by Ordinance # Funds sufficient for this appropriation are available from the source indicated below. Account Title: Amount Not to Exceed: Account Number: This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of

funds for specific purchases will, of necessity, be determined as each using agency places its order.

This legislative action does not impact the County financially and does not require Finance/Budget approval.

Fiscal Information (to be verified by Budget Office in Finance Department)

## Fiscal Note: Jackson County, Missouri

Funds sufficient for this transfer are available from the sources indicated below.

Date:	February 18, 2016	C#	RI	ES <u># 19092</u>
Departme	ent / Division	Character/Description	From	То
Park Fund - 003				
7768 - Black Econo	omic Union of GKC	56789 - Outside Agency Funding	20,000	
7776 - aSTEAM Vil	lage	56789 - Outside Agency Funding	· · · · · · · · · · · · · · · · · · ·	20,000
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	20 21 21			-
	·		20,000	20,000



# 2016 OUTSIDE AGENCY FUNDING REQUEST

415 E 12th Street, 2nd Floor Kansas City, MO 64106 Email: auditor@jacksongov.org

New Agency Request	•
Previously Funded	C

Name: aSTEAM Village	
Address: 1601 E. 18th St. S <sub>City:</sub> Kansas City	State: MO Zip Code: 64108
Phone No: (816) 535-0939 Website: www	v.asteamvillage.org
Federal Tax ID No: 46-5023913	Fiscal Year: Jan. 1 to Dec. 31
Executive Director/President: William Wells	Phone: (816) 288-5757 Email: william@asteamvillage.org
Principal Contact: William Wells	Phone: (816) 288-5757 Email: william@asteamvillage.org
Total # of Programs Requesting Funding For: 1	Total Amount Requested: \$ 20,000

Please complete the following sections for your 2016 Outside Agency Proposal.

Section B and Section C must be filled out for each program you are requesting funding for.

Section A:

Agency Revenue Information

Section B:

**Program Budget Request** 

Section C:

Program Information

2016

2015

Funding Entity	Sourc	e Description		Actual	Projected
Federal					
State					
Jackson County	Outside Agency Co	ontract		.50	\$20,000
City of Kansas City					
Charity/Donations	Corporate Donation	าร		\$ 7,500	\$ 15,000
Fundraisers	Pizza Hut			\$ 450	\$ 600
Other	Corporate Sponso	rships			\$14,400
	7.			\$ 7,950	\$ 50,000
Does your agency have cash reserves? YES  NO  If so, what is the current balance? \$ 400  Please check all Jackson County sources your agency received funding from in 2015:					
	COMBAT  Domestic Vi	-		ly Disabled	
Please check any of th	e following your a	agency receive	d funding	or resources from	in 2015:
		Goods	Service	s Cash	Amount
Harvesters					
Mid America Regional	Council				
MAAC Link					
United Way					
Other:					

		Program Request#	
Agency Name:	Program:	New ProgramRequest	
aSTEAM Village	aSTEAM Village Youth Club		$\sim$
		Previously Funded	$\bigcirc$

#### Salaries

attach job description or duties for NEW Program requests only

		<u> </u>	
Position / Title		Amount	Check Box if 100% Funded by Jackson County
		\$ 0	
		\$ 0	
		\$ 0	
	T.	\$ 0	
		\$ 0	
		\$ 0	
	Fringe Benefits		

Total Salaries & Fringe Benefits

\$ 0

#### Contractual Services & Supplies

Description	Amount	Check Box if 100% Funded by Jackson County
DigiPen Video Game Design Certification	\$ 7,500	Ø
LearnKey Computer Science and I.T. Certification Courses	\$ 10,000	
Robotics Registration Fees for Qualifiers & Tournaments	\$ 1,500	
Youth Robotics and Racing Jerseys	\$ 1,000	
		] 🗆
×		

**Total Contractual Services & Supplies** 

\$ 20,000

**Total 2016 Program Budget Request** 

\$ 20,000

Total Program Cost

\$ 50,000

Total cost to run your program regardless of the Jackson County funding you are requesting.

Estimate of Cost Per Participant

\$250

Agency Name: aSTEAM Village

Program:

aSTEAM Village Youth Club

#### **Proposed Program**

Detail functions to be performed.

aSTEAM Village "esteem" is an all-inclusive community project that is committed to diversifying the STEAM (Science, Technology, Engineering, Arts and Math) fields by increasing the interest, exposure, expectations and expertise in STEAM education for urban, rural, female and other under-represented communities.

Our hands-on, interactive programs, Robotics, Radio-Controlled Race Car Engineering, Video Game Design and Computer Programming enables students to learn, share and compete with other youth on both a local and national level. Why is this a priority for your agency?

Funding and expanding this program is a priority because unfortunately, not all students are exposed to STEM-related careers in school or in their homes. Even if students do participate in STEM-focused extracurricular programs, they have limited connections to real-world, hands-on experiences that move them from the classroom into the workplace. Therefore, it is imperative that under-represented groups of students learn not only the skills they need to succeed in these high-demand professions but that they also get introduced to the mentors and companies that can make their dreams a reality.

Moving beyond K-12 STEM is of equal importance. This project addresses the needs to

Check if this program is sustainable without Jackson County's funding:





### **Target Population**

Describe target population and demographics to be served by each program.

Our target population for this program is all students and families in the Jackson County area.

Our student participants range in grade levels from 1st to 12th grade.

What criteria do you have for the participants you serve?

The only criteria that we have for the participants that we serve is for the student to have a desire to expand their learning in the areas of science, technology, engineering, arts (digital) and mathematics. We also ask for the students to commit to attending all practices because they are a part of a team and their teammates must rely on their consistent participation and

## **Service Delivery Area**

Identify the number of partic		erves.		
Total # served	# served from Jackson County			rved from er Areas
200	190		10	
Identify your specific serv Zip Code	ice delivery area by zip Geographical Boundary		phicalbound	ary.
64108				
Is this is a Countywide Prog	ram? YES <b>①</b>	NO O		
If not, What is the Jackson (	County Legislative District	?		
Does your agency keep a	list of participants for th	nis program?	YES	NO <b>О</b>
Please classify your prog	ram from the following ty	pes of services	<b>:</b> :	
Community Improvement	/Outreach	•		
Food/Emergency Service	s			
Health/Wellness				
Indigent Population				
Senior Services				
Youth Services		V		
Other:				
Are your services availabl	le to anyone? YES 💿	NOO		

#### **Outcomes**

•	omes related to this program. Indance, behavior and grades will increase.	Please check if the outcome is measurable.		
Students will ha advanced math	ave an increased level of confidence in taking and science classes.			
3. Parents will bed	come more engaged in their child's education.			
4. Parents and stu- post-secondary	idents will begin planning and discussing the and career pathways and opportunities.			
5.				
Your application will not be considered complete without answering all questions. All applicants must fulfill the requirements listed below to complete the funding request process.  Please check the box acknowledging you understand your organization's responsibility to the following.  Reviewed the Non-Allowable Expenses Reviewed Executive Order 04-18 to deem your agency in compliance if funding is awarded and approved.  Include the Jackson County Logo and credit Jackson County in marketing efforts and provide the				
Auditor's Office with copies.  Your organization will submit the following with the Outside Agency Proposal:  Certificate of Liability Insurance valued at a minimum of \$1 million per occurance or \$2 million annual aggregate  Missouri Secretary of State Certificate of Good Standing  Missouri Secretary of State Annual Registration Report				
Signature: Date Submitted:	William Wells			
23.3 333	SAVE			

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