



HOUSE of REPRESENTATIVES

STATE OF MICHIGAN

Appropriations Requests for Legislatively Directed Spending Items

1. The sponsoring representative's first name:
Philip
2. The sponsoring representative's last name:
Green
3. The cosponsoring representatives' names. All cosponsors must be listed. If none, please type 'n/a.' A signed letter from the sponsor approving the co-sponsorship and a signed letter from the member wishing to co-sponsor are required. Attach letters at question #9 below.
n/a
4. Name of the entity that the spending item is intended for:
KEYS: Kalasho Education and Youth Services
5. Physical address of the entity that the spending item is intended for:
29900 Lorraine Ave. Warren, MI 48093
6. If there is not a specific recipient, the intended location of the project or activity:
n/a
7. Name of the representative and the district number where the legislatively directed spending item is located:
Ron Robinson, 58
8. Purpose of the legislatively directed spending item. Please include how it provides a public benefit and why it is an appropriate use of taxpayer funding. Please also demonstrate that the item does not violate Article IV, S 30 of the Michigan Constitution.
KEYS provides a robust number of human service wrap-around programs including food service, transportation, healthcare, legal aid, and job training for students and parents. Due to the ongoing behavioral health issues exhibited by young people, KEYS has seen the increased need for intensive and innovative behavioral health services. To meet this need, KEYS has established a state-of-the-art BH services center called MindGarden employing a host of advanced therapies including music, equine, culinary arts, and other sensory therapeutic methods.

9. Attach documents here if needed:

Attachments added to the end of this file.

10. The amount of state funding requested for the legislatively directed spending item.

5000000

11. Has the legislatively directed spending item previously received any of the following types of funding? Check all that apply.

["State"]

12. Please select one of the following groups that describes the entity requesting the legislatively directed spending item:

Non-profit organization

13. For a non-profit organization, has the organization been operating within Michigan for the preceding 36 months?

Yes

14. For a non-profit organization, has the entity had a physical office within Michigan for the preceding 12 months?

Yes

15. For a non-profit organization, does the organization have a board of directors?

Yes

16. For a non-profit organization, list all the active members on the organization's board of directors and any other officers. If this question is not applicable, please type 'n/a.'

Nathan Kalasho, Matthew Shina, Nadine Khalil, Dylan Jousif

17. "I certify that neither the sponsoring representative nor the sponsoring representative's staff or immediate family has a direct or indirect pecuniary interest in the legislatively directed spending item."

Yes, this is correct

18. Anticipated start and end dates for the legislatively directed spending item:

10/1/2025 - 9/30/2026

19. "I hereby certify that all information provided in this request is true and accurate."

Yes