



# HOUSE of REPRESENTATIVES

## STATE OF MICHIGAN

### Appropriations Requests for Legislatively Directed Spending Items

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1. The sponsoring representative's first name:  
Betsy
2. The sponsoring representative's last name:  
Coffia
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:  
Traverse City Area Public Schools
5. Physical address of the entity that the spending item is intended for:  
1009 S. Oak Street Traverse City, MI 49684
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:  
Betsy Coffia - 103rd House District
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.  
Traverse City Area Public Schools (TCAPS) is a public school district. The TCAPS Student Support Network (SSN) has served 531 students between August-December 2024. 230 students are eligible for assistance under the McKinney-Vento (MV) Homeless Assistance Act. 11.7% (27 students) of MV students are also part of the English Learners (EL) program. 301 students are not eligible for MV, but have received assistance from SSN. 20.6% (62 students) of the 301 students served are also part of the EL program. Barriers for students who receive services from SSN and who are in the EL program

include the ability to qualify for housing assistance, access to other community services, and enrollment requirements. 20.6% of students accessing basic needs from SSN are EL. High demand for the program and its demonstrated success in supporting students has resulted in increased staffing needs. Requesting 1 Full Time Home/School Liaison, 2 Additional EL Teachers Elementary, and 5 Additional EL Sections Secondary.

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.

500000

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

["Private"]

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

Public school district

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

Not applicable

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

Not applicable

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

Not applicable

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.'

n/a.

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:

Oct 1 2025-Sept 30 2026

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

Yes