

**TO THE HONORABLE BOARD OF COMMISSIONERS OF BERRIEN COUNTY, MICHIGAN:** Your Personnel and Human Services Committee respectfully recommends the adoption of the following:

**RESOLUTION**

**WHEREAS,** the Berrien County Health Department provides substance abuse services; and

**WHEREAS,** substance abuse is one of the factors leading to youth committing crime; and

**WHEREAS,** Family Empowerment Services works with the Court system on pre-arrest diversion community-based services for youth and would like to refer youth to the Berrien County Health Department; and

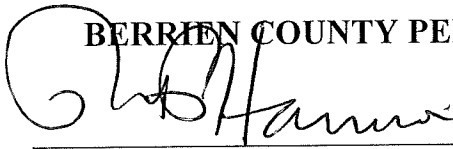
**WHEREAS,** they require a Memorandum of Agreement outlining the responsibilities of both parties for this purpose; and

**WHEREAS,** Corporate Counsel has reviewed and approved the Memorandum of Agreement to be executed by the two parties.

**NOW, THEREFORE, BE IT HEREBY RESOLVED** that the Berrien County Board of Commissioners authorizes the Chairman or his designee to execute the Memorandum of Agreement between Family Empowerment Services and the Berrien County Health Department for providing community-based services as a pre-arrest diversion for youth

**Respectfully submitted,**

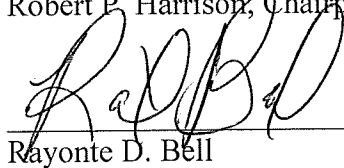
**BERRIEN COUNTY PERSONNEL AND HUMAN SERVICES COMMITTEE**



Robert P. Harrison, Chairperson



Michael J. Majerek, Vice Chairperson



Rayonte D. Bell

RESOLUTION APPROVED AS TO FORM	
Administrator _____	Date _____
Comments Attached _____	
Corporate Counsel _____	Date _____
Comments Attached _____	