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| Community Partner | Contribution (detail) | Staff Provided | In-kind value | Sites Served |
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**Sustainability and MOU Template**

Summary of MOUs (Community Partners that contribute to your program)

Please fill in the table with the information provided by the MOUs.

## MEMORANDUM OF UNDERSTANDING (MOU)

## TEMPLATE

***MEMORANDUM OF UNDERSTANDING (MOU)*** *between*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [insert name of Program]*

*and*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [insert name of Partner]*

This is an agreement between “Program”, hereinafter called \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and “Partner”, hereinafter called \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**I. PURPOSE & SCOPE**

The purpose of this MOU is to clearly identify the roles and responsibilities of each party as they relate to….

In particular, this MOU is intended to:

*Examples:*

* Expand access to programming for more youth
* Enhance students’ learning through enrichment
* Provide meals
* Provide transportation to and from program/field trips
* Evaluate the program

**II. BACKGROUND**

Brief description of the parties involved in the MOU with mention of any current/historical ties to this project.

**III. PROGRAM RESPONSIBILITIES UNDER THIS MOU**

[Program] shall undertake the following activities:

**IV. PARTNER RESPONSIBILITIES UNDER THIS MOU**

[Partner] shall undertake the following activities:

**V. IT IS MUTUALLY UNDERSTOOD AND AGREED BY AND BETWEEN THE PARTIES THAT:**

1. Modification

2. Termination

**VI. FUNDING**

This MOU does (does not) include the exchange of funds between the two parties.

**VII. EFFECTIVE DATE AND SIGNATURE**

This MOU shall be effective upon the signature of Parties A and B authorized officials. It shall be in force from (date) \_\_\_\_\_ to (date) \_\_\_\_\_.

The Program and Partner indicate agreement with this MOU by their signatures.

**Signatures and dates**

[Insert name of Program] [Insert name of Partner]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_ Date