

# MEMORANDUM OF UNDERSTANDING

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## 1. Purpose

The purpose of this Memorandum of Understanding (MOU) is to serve as a written understanding between Team 4 and the ITI Marconi. This MOU documents the responsibilities of the principal organizations involved in the deployment of Moodle cloud course.

## 2. Objectives, Scope, and Major Activities

- **Objective:** The objective of Moodle cloud course is to provide a tool to make teaching and learning english language easier. Moodle cloud will provide a tool to create lessons and tests to be made accessible to list groups of students.
- **Scope:** The scope of Moodle cloud is to be a simple platform one can use and learn how to use it easily, without needless explanations.
- **Major Activities:** The major activities are for teachers: create and modify courses, tests, lessons and add students to courses and edit questions pools.

## 3. Responsibilities

- ITI Marconi

As the principal customer for Moodle cloud being deployed, the IT department of the school is responsible for:

1. Manage the site container where the service will be located;
2. Create and manage admins and teachers accounts;
3. Ensure that required strategic functional plan for the service is developed;
4. Ensure the security of the school's network while using the aforementioned platform;
5. Keep your service up to date when new security patches come out up to date
6. Manage all permissions of the various accounts; and
7. Sign this agreement and act in the best interest of the ITI Marconi to ensure continued availability and integrity of the platform and associated data.

- MOU Team 4 Team 4 will provide all necessary computer based services to the ITI Marconi to ensure successfully deployment of Moodle cloud. In addition the team 4 will:

1. Provide strategic guidance and oversight to ITI Marconi, on the secure and adequate implementation of the platform;
2. Ensure that baseline agreements on system availability, reliability and accessibility are met or otherwise highlighted and discussed with the ITI Marconi;
3. Define/redefine requirements and push solutions/capabilities to the ITI Marconi as quickly as possible;
4. Perform the systems engineering, test, configuration management, and total integration effort in concert with ITI Marconi points of contact. Define the system architecture, interfaces and develop support concepts for the Moodle system(s);
5. Detect new security threats and equip accordingly;

## 4. Services

All services provided under this MOU shall be highlighted in this section, including but not limited to:

- Description of the information system architecture;
- Description of communication links;
- Description of system specific algorithms to be implemented;
- Advanced notification of any planned system modifications, including client modifications;
- Testing that will be done internally at both ends of the interface;
- Support and resource required by both the ITI Marconi and Team 4;
- System reliability plans;
- System security;
- System security plan(s), if applicable;

## 5. Duration and Amendments of the MOU

This MOU will be reviewed annually from the date signed. The IT department of ITI Marconi will be responsible for this review.

# MEMORANDUM OF UNDERSTANDING FOR SYSTEM NAME BEING INTERCONNECTED/DEPLOYED

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## AGREEMENT/SIGNATURE PAGE

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By signing this page, all parties agree to ensure compliance with applicable Federal and respective agency policies, mandates and instructions that will ensure the continued availability, confidentiality and integrity of information being process by or through this system.

### Federal Communications Commission

**Project Manager** Printed Name:\_\_\_\_\_ Date:\_\_\_\_\_

Signature:\_\_\_\_\_

Telephone Number:\_\_\_\_\_ E-Mail Address:\_\_\_\_\_

**Customer Service Representative** Printed Name:\_\_\_\_\_ Date:\_\_\_\_\_

Signature:\_\_\_\_\_

Telephone Number:\_\_\_\_\_ E-Mail Address:\_\_\_\_\_

**Computer Security Officer** Printed Name:\_\_\_\_\_ Date:\_\_\_\_\_

Signature:\_\_\_\_\_

Telephone Number:\_\_\_\_\_ E-Mail Address:\_\_\_\_\_

### MOU Federal Agency Name

**Project Manager** Printed Name:\_\_\_\_\_ Date:\_\_\_\_\_

Signature:\_\_\_\_\_

Telephone Number:\_\_\_\_\_ E-Mail Address:\_\_\_\_\_