

SAMPLE FORMAT AND CONTENT

MEMORANDUM OF UNDERSTANDING

All *italicized* sentences are considered instructions and should be deleted prior to the submission of the final MOU.

This Memorandum of Understanding (MOU) is entered into by and between: *Provide the agency name and a brief description of each agency.*

- A. Purpose.** *State the purpose of the MOU. Include statements that explain how the collaborative relationship enhances or benefits the Applicant's program;*
- B. Roles and Responsibilities.** *Clearly describe and delineate the agreed upon roles and responsibilities each organization or agency will be providing to ensure project success. The roles and responsibilities should align with project goals, objectives and target outputs. This may be contribution of staff time, in-kind contributions of space or materials, delivery of program services, provision of training or staff expertise, etc.*

Agency A agrees to:

Responsibility/Activity	Responsibility/Activity

Agency B agrees to:

Responsibility/Activity	Responsibility/Activity

C. Reporting Requirements. *Describe who will be responsible for collecting, collating and submitting data as per the project target outputs and outcomes.*

D. Timeframe. *Clearly state the time period that this MOU will be in effect.*

This MOU will commence on _____ and will dissolve at the end of the grant funding period on _____.

F. Confidentiality.

In order to ensure the safety of clients, all parties to the Memorandum of Understanding agree to adhere to the confidentiality expectations as outlined in the Grant Agreement.

The designated lead agency accepts full responsibility for the performance of the collaborative organizations/agencies.

This Memorandum of Understanding is the complete agreement between _____ and _____ and may be amended only by written agreement signed by each of the parties involved.

The MOU must be signed by all partners. Signatories must be officially authorized to sign on behalf of the agency and include title and agency name.

AGENCY A

Authorized Official: _____
Signature Printed Name and Title

Address: _____

Telephone(s): _____

E-Mail Address: _____

AGENCY B

Authorized Official: _____
Signature Printed Name and Title

Address: _____

Telephone(s): _____

E-Mail Address: _____