
Sample Memorandum of Understanding

Between _____ and _____

This agreement is between (organization name) and (organization name).

PURPOSE

[Instructions: This statement must specify the expected outcomes of the collaborative/partnership.]

- What will the partnership do?
- Who will be involved in carrying out objectives of partnership?

SERVICE AREA

[Instructions: This section must state the geographic/jurisdictional boundaries of the program.]

The boundaries of the service area are defined as: _____

RESPONSIBILITIES

[Instructions: This section must specify the responsibilities and roles of the parties to this agreement.]

TERM OF AGREEMENT

This agreement shall continue to (date). It may be terminated earlier by a 30-day written notice from either party for cause. Cause includes, but is not limited to, a change in state, federal, or local directive. The effective date is the date this Agreement is signed by both parties.

SIGNATURES

These responsibilities are agreed to by the following authorized signatories.

[Organization name]:

Name (Print) _____ Title _____

Signature of authorized representative _____ Date _____

[Organization name]:

Name (Print) _____ Title _____

Signature of authorized representative _____ Date _____ *Source:

Adapted from Hobbs, L.J. (1993). *Tackling the confidentiality barrier: A practical guide for integrated family services*