# **MEMORANDUM OF UNDERSTANDING**

<Vocational Training Partner>

And

<Company>

On

**Support In Skilling Activities** 

Date: DD/Month/YYYY |Place | India

## MEMORANDUM OF UNDERSTANDING

## BETWEEN

## <VTP Name>

Contact	
Position	
Phone No.	
E-mail	

### AND

#### <Company Name>

Company Contact	
Position	
Phone No.	
E-mail	

#### Background

<VTP>

Brief profile of the VTP

#### <Company>

Brief Profile of the company

#### 1. Purpose of this Agreement

- Both the parties have come together to provide an ecosystem for skilling / up-skilling of fresh / existing talent. The <VTP> shall conduct the LSSSDC approved courses and <Company> shall provide infrastructure to fulfil the need of practical part of the course.
- This is a non monitory agreement. No party has monetary obligation on other party towards sharing of resources.
- 2. Roles

## A. <VTP>

- 1. All the infrastructure support required by VTP is defined in Annexure I of this MoU. Both the parties have discussed and have mutual consent over Annexure 1.
- 2. Shall conduct only practical sessions in the company premises.
- **3.** Once a batch is formed <VTP> shall send a list of students / trainees to company and seek permission for the given list at least a month prior to the proposed date of commencement of practical session.
- 4. Shall obtain a formal written approval from the company.
- **5.** Shall provide the schedule of the training, i.e. TDP (Training Development Plan)
- 6. VTP shall nominate a person to supervise the conduct and working of the set of trainees thus sent for the practical purposes.
- 7. Supervisor (in co-ordination with company representative) shall be responsible to implement and monitor the agreed schedule.
- 8. He / She shall be in contact of the company representative on daily basis to monitor the progress of the trainees.
- **9.** Only on receipt of "Letter of Completion of Practical Session" from the company, shall the training be considered as complete.
- **10.** It will be VTP's responsibility to get the due diligence done of the company and it shall provide all the support required for the same.

## B. <Company>

- 1. Company has approved the requirement of VTP as stated in the "Annexure 1" of this MoU. Both the parties have discussed and have mutual consent over Annexure 1.
- 2. Shall revert within 10 days of receipt of list of candidates from the VTP.
- 3. Shall nominate a representative to co- ordinate activity with Supervisor from VTP
- 4. Shall abide by the TDP provided by the VTP
- **5.** One guide per trainee(s) shall be nominated for guidance and coaching.
- 6. He / She shall regularly communicate with Trainee's supervisor regarding their progress.
- 7. Company shall maintain an authentic attendance record of the trainees. This record must display number hour spent by each trainee on each day during the training period at the company.
- 8. The company shall not engage the trainee in any other activity apart from the curriculum.
- **9.** At the end of the Practical session, a "letter of completion of practical session" duly signed by the guide of that trainee, shall be issued. Without which the training shall not be considered as complete.
- **10.** Company agrees to get the infrastructure inspected by the accreditation assessor, as directed by VTP
- 11. Company agrees to support the audits as and when required by the LSSSDC.

#### 3. **Term**

- This MoU shall commence on the date of signature and shall endure for a period of **three** years.
- It may be terminated by either party upon giving no less than three months notice in writing.
- This Memorandum of Understanding is a document of good faith and Implementation of the MoU would be monitored on a six monthly basis.

### 4. Communication

Both parties agree to:-

- Communicate regularly telephonically or via emails.
- Meet formally at least twice a week to review progress.
- Update their respective Senior Managers/Heads of progress.

## 5. Status

5.1 Notwithstanding the terms of any other provisions of this MoU, this MoU is not legal binding and nothing contained in this MoU shall impose any legal obligations on either party whatsoever.

5.2 This MoU may be amended by agreement of both parties in writing.

5.3 No change can be made to this MoU without written consent and duly signed by both the parties. Additions, deletions and/or alterations to this MoU may be effected with the written agreement of both the parties to this MoU concerning the changes. Documents containing such additions, deletions and/or alterations and signed by both the Parties shall form addenda to this MoU, and be deemed to be part of this MoU.

5.4 Any changes must be brought in notice of LSSSDC within 7 days

## 6. Force Majeure:

Neither party shall be liable to the other for failure or delay in the performance of any of its obligations under this MOU for the time and to the extent such failure or delay is caused due to acts of God, natural disaster, fire, floods, explosions or earthquake, epidemic or quarantine restrictions, serious accidents, war, insurrection or riots, strikes, legal necessity or labour troubles, or any other cause beyond the affected party's reasonable control, provided that sufficient notice of such occurrence of force majeure is communicated to the other party.

<name> Director <vtp></vtp></name>	Signature
<name> Designation <company></company></name>	
	Signature
	Date :

# Annexure 1

Details of support required from the Company

- 1. Course Name:
- **2.** Duration of the Course in hours
  - Theory: \_\_\_\_\_ Hours
  - Practical: \_\_\_\_\_ Hours
- **3.** Number of students:

Topics to be covered	Learning Objectives	Support required
		List of equipment must be attached as per the protocol

Guide / Instructor: form the company: \_\_\_\_\_

Contact Details: \_\_\_\_\_

SPOC from VTP :\_\_\_\_\_

Contact Details:

<Company> hereby agrees provide above support to <VTP>

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

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Company Stamp / Seal

<VTP> hereby agrees to avail above facility for its skilling course mentioned in this document.

Signature:	
Name:	
Designation:	
Place:	
Date:	

VTP Stamp / Seal