

ATTACHMENT I – MEMORANDUM OF UNDERSTANDING TEMPLATE

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) document describes the agreed-upon responsibilities and expectations between _____ and _____ for the use of services and/or funds related to the Workforce Innovation and Opportunities Act One Stop Operator and Title 1 Adult and Dislocated Worker contract originating with Employ Milwaukee. The purpose of the overall contract is to better meet the needs of adults and dislocated workers in Milwaukee County.

A. Purpose and Scope. *State the purpose of the MOU, making clear how it relates to the overall project requesting funding through Employ Milwaukee. Briefly describe each of the agencies involved.*

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.*

C. Funding. *If applicable, describe any grant funds, the amount and category (personnel, office supplies, contracted services, etc.) that will be provided or exchanged. In addition, please specify any in-kind or leveraged contributions. If applicable, describe how the funds will be distributed (i.e., invoicing, cost reimbursement, one-time grant).*

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 Employ Milwaukee-funded sub-recipient's contract period, unless formally terminated prior to that time.

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: _____