**Sample Memorandum of Understanding**

**Statement of Purpose for Partnership: [Applicant Name]** and **[List partner(s)]** intend to collaborate on the application for the **OVW** **Transitional Housing Assistance Grants for Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking Program**. The lead applicant and the partners have agreed to collaborate on this application to broaden services the lead applicant is able to offer to survivors of domestic violence, dating violence, stalking, and sexual assault.

The application has been reviewed and approved by the partners submitted to the Office on Violence Against Women for Fiscal Year **[include fiscal year].**

**Name of lead applicant and each partner agency, including identified key staff:**

1. Lead Applicant:
   1. Agency name:
   2. Key Staff:
2. Partner number 1:
   1. Agency name:
   2. Key Staff:
3. Partner number 2:
   1. Agency name:
   2. Key staff:
4. [Add more (here and in each item below) if needed.]

**Service Area**

* The service area included in this partnership is: [specify region in your state, Tribe, territory, county, or multi-jurisdictional area].

**History of Collaborative Relationship**

1. Provide a brief history of the collaborative relationship among **all parties** to the MOU:
2. Specify each party’s participation in developing the application.
   1. Lead Applicant:
   2. Partner 1:
   3. Partner 2:

**Roles and Activities**

1. Describe in detail the following Lead Applicant activities

* Lead applicant’s role in managing the partnership(s):
* Lead applicant reporting responsibilities:
* Lead applicant responsibility to ensure each partner has adequate training to work with victims—specifically regarding confidentiality and voluntary services:
* How the lead applicant will perform regular evaluations of the partnership to ensure victim engagement and satisfaction with the services provided:
* Lead applicant’s role in coordinating regular meetings with all identified partners to discuss the efficacy of the partnership:
* Other:

1. Describe in detail the following partner(s) roles (remove or add roles as needed)

* **Name of Partner and key staff Agency 1**:
* Partner roles and activities:
* Activities/services partner(s) will provide to victims or lead applicant:
* How the partner intends to incorporate feedback from victims to improve services:
* Other:
* **Name of Partner and key staff agency 2**:
* Partner roles:
* Activities/services partner(s) will provide to victims or lead applicant:
* How the partner intends to incorporate feedback from victims to improve services:
* Other:

1. For projects in which a project partner will be providing housing or support services with non-grant funds, state the partner’s commitment to follow the applicable requirements listed in the Purpose Areas and Program Requirements sections of the NOFO.

**Outcomes**

1. Describe the anticipated outcomes resulting from the partnership(s)
   1. Anticipated outcomes for Partnership 1:
   2. Anticipated outcomes for Partnership 2:

**Compensation Arrangement:**

The lead applicant has discussed compensation with the designated project partner(s) and has discussed that all compensation must be for services rendered and accompanied by an invoice prior to payment.

1. Each partner has reviewed the budget and is aware of the compensation arrangements between all partners under this agreement and the lead applicant.
2. The following partners will be compensated under this agreement for the following activities:
   1. Partner 1:
      1. Compensation:
      2. Activities compensated (Time and travel, supplies, staff time offering services to victims, etc.).
   2. Partner 1:
      1. Compensation:
      2. Activities compensated (Time and travel, supplies, staff time offering services to victims, etc.).
3. Describe the invoicing policy that the designated partner(s) will use for payment.

**Implementation**

The Lead Applicant and the identified partner(s) are aware that the activities detailed in this agreement are contingent on **[Lead Applicant]** being awarded funding under the OVW Transitional Housing Assistance Grants for Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking Program. **[Lead applicant]** has informed identified partner(s) that activities under this agreement may not begin until the budget receives final clearance and OVW approves the housing policies and procedures. If awarded, the grant period is anticipated to be **MM/DD/YYYY** through **MM/DD/YYYY.**

**Conclusion**

The lead applicant has reviewed this agreement with the identified partner(s). The lead applicant and the identified partner(s) agree to the terms of this MOU agreement and agree to implement the arrangements made in this agreement should the lead applicant receive grant funding under the OVW Transitional Housing Assistance Grants for Victims of Domestic Violence, Dating Violence, Sexual Assault and Stalking Program.

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

Lead applicant **Title/Agency**

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

Partner 1: **Title/Agency**

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

Partner 2: **Title/Agency**