

SAMPLE

**MEMORANDUM OF AGREEMENT
BETWEEN
Good Health Care System
AND
MyTown Public School**

1. PURPOSE: The purpose of this Memorandum of Agreement (MOA) is to formalize an agreement between the *Good Health Care System* and the *MyTown Public School* to form a partnership to hold an R-COOL-Health Scrubs Camp. The areas of responsibility and relationships presented herein provide the concept under which the program will be executed.

2. MUTUAL INTEREST OF THE PARTIES: This Scrubs Camp is of mutual interest to the parties because it is educationally beneficial for the students attending the camp to learn about different health professions and duties associated with each profession.

3. RESPONSIBILITIES OF THE PARTIES: *The following paragraphs identify responsibilities of the organizations involved:*

a. *Good Care Health System.* Good Care Health System shall provide *MyTown Public School* with goods and/or services in accordance with the purpose, terms, and conditions of this MOA and implementing arrangements, as appropriate. Specifically, *Good Care Health System* will provide the following services and/or goods.

- (1) Coordinate and facilitate the Scrubs Camp logistics, including evaluation, facility use, presenters, etc.
- (2) Provide educational and interactive activities for the student participants.
- (3) Provide snacks and lunch for the participants, speakers, and volunteers.
- (4) Reimburse presenters for the expenses associated with their presentations as long as receipts are submitted to the Good Care Health System finance department within ten days of the camp's conclusion. Or, order supplies for the presenter if supply order is submitted to the Scrubs Camp Coordinator a minimum of 30 days prior to the camp.
- (5) Provide facility space for the Scrubs Camp.
- (6) Supervise the students at the camp.
- (7) Submit all required documentation to the Center for Rural Health at the conclusion of the camp per the grant requirements.

b. *MyTown Public School.* MyTown Public School responsibilities:

- (1) Provide advertisement for the Scrubs Camp in the school newsletter.
- (2) Duplicate, disseminate, and collect all student waivers.
- (3) Promote transportation of students from the school to Good Care Health System and back to the school.
- (4) Provide chaperones during the Camp.

4. DISPUTE RESOLUTION: In the event of a dispute between the parties, *MyTown Public School* and *Good Care Health System* agree to use their best efforts to resolve that dispute in an informal fashion through consultation and communication, or other forms of non-binding alternative dispute resolution mutually acceptable to the parties.

5. EFFECTIVE DATE: This agreement becomes effective upon the date of the last approving signature and will remain in effect until May 1, 2021.

6. ACCEPTANCE OF AGREEMENT:



Daniel Bautista

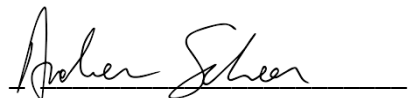
CEO

Good Care Health System

MyTown, ND 5555

9/15/20

DATE



Andrew Scheer

Principal

MyTown Public School

MyTown, ND 5555

9/13/20

DATE

**THIS IS JUST A SAMPLE OF ONE MOA – YOU MUST
CREATE YOUR OWN MOA THAT WORKS FOR YOUR
SPECIFIC CAMP AND SUBMIT ONE FOR EVERY PARTNER!**

IN THIS EXAMPLE THERE WOULD ALSO NEED TO BE MOAs FOR:

- NeighborTown Public School (NeighborTown)
- MyTown Job Development Authority (MyTown)
- NeighborTown Community Hospital (NeighborTown)
- Kortz Chiropractic (Shelbyville)
- Deerpass Dental (Deerpass)
- Knutson Veterinary Services (MyTown)
- Rural Vision (NeighborTown)
- MyTown EMS (MyTown)
- County Public Health (Deerpass)