

REVISE AS NEEDED

**Memorandum of Understanding (MOU) Between
[LEA Name] (hereinafter referred to as the "LEA"),
and
[Institution of Higher Education] (hereinafter referred to as the "IHE")
and
[Add additional partners as needed]**

**Title:
[Program Title] (hereinafter referred to as the "Program")**

**Effective:
[MOU effective date range]**

This MOU outlines the agreement between the "LEA" and the "IHE," an approved New York State institution offering registered certification programs through its School of Education, jointly referred to as the "Partnership." The purpose of the "Partnership" is to prepare qualified educators in the "LEA," leading to education degrees at the "IHE," and New York State certification in areas of shortage within the "LEA."

The "Program" will emphasize Grow your Own (GYO) strategies in on-site models that address "LEA" staffing needs and improves diversity among its teacher workforce. The "Program" will be carried out in accordance with New York State preparation program standards and regulations.

The parties agree to the following:

- A. The "Program" will offer [brief description of the program in 2-3 sentences.]
- B. Candidate recruitment will begin on [date]. [list of eligible candidates, requirements] are eligible.
- C. [Brief description of LEA employment agreement/offer to eligible candidates during or after the program.]
- D. [Label or brief description] experiences will be provided for all candidates to consist of no less than [timeframe].
- E. The "Program" will be held [when courses will be offered]. Courses will be [in-person and/or virtual] and will be held [on the IHE campus or in LEA buildings].
- F. The "Partnership" will meet "Program" implementation, budget, and reporting requirements as outlined in the [funding source/grant] application information packet dated [date].
- G. Specific responsibilities of each of the parties for the purpose of "Program" implementation are as follows:

The "LEA" will:

- A. Identify a Teacher on Special Assignment (TOSA) who will serve as the "LEA" coordinator for the "Program," including liaison between the "LEA," "IHE," and candidates. The TOSA will advise, mentor, and problem-solve, and work with the "IHE" "Program" Director and "Partnership" Coordinators to provide mentoring workshops for candidates and "Program" alumni who are new teachers in the "LEA."
- B. Implement the "LEA" recruiting plan to recruit eligible candidates into the "Program."
- C. Screen candidates and put forward those that the "LEA" hires as "Program" candidates and provides them support as future educators.
- D. Ensure that candidates are placed in mentor classrooms for [timeframe escalation throughout the duration of the program].

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- E. Design paraprofessional responsibilities to align with “Program” guidelines in order to allow candidates to fulfill candidate responsibilities while maintaining full time employment.
- F. Invoice the “IHE” and disburse funds to candidates each year.
- G. Continue to develop the “Program” and support the development of alumni teaching in the LEA.
- H. Work with the “IHE” within the “LEA” to provide candidate support for state-required testing, admissions procedures, and financial aid prior to and during the “Program.”
- I. Facilitate space use in the “LEA” for the “Program” at no cost to the “IHE.”
- J. Guarantee that certified “Program” alumni are given an interview and consideration for “LEA” positions.

The “IHE” will:

- A. Offer a [degree] in addition to a recommendation for a [certification]. The courses will be offered from [date range].
- B. Provide key faculty member(s) to implement the “Program.”
- C. Distribute grant funding to the “LEA” and scholarships to candidates.
- D. Advise students on admissions requirements, financial aid opportunities, scholarship opportunities, use of library and other university resources, and other administrative details.
- E. Identify a key faculty adviser who will work directly with the “LEA” and various departments at the “IHE” as “Program” Director.
- F. Report and provide documentation of “Program” progress to interested parties from the “IHE,” “LEA,” community, NYSED and the legislative body.
- G. Provide the “LEA” with promotional brochures and student orientations to assist with “Program” recruitment.
- H. Work with the “LEA” to ensure adequate mentoring/advising/tutoring and other support are provided.
- I. Maintain an advisory board that will oversee curricular objectives, identify course faculty, and serve as quality check for the “Program.” The advisory board will meet on a regular basis and consist of faculty input from key areas, along with input from representatives of LEAs, current candidates, and alumni to continually review, advise and improve curriculum, quality and evaluation of the “Program,” and support for candidates.
- J. Provide supervision and facilitate learning activities such as peer observation and feedback.
- K. Collaborate with the “LEA” to recruit and select candidates in underrepresented groups, who may also be financially under-resourced, in shortage areas identified by the “LEA.”
- L. Provide certification exam preparation services to candidates within, and beyond, coursework.
- M. Provide prior learning assessment and waive/grant credit as applicable to support candidate completion of the “Program.”
- N. Apply flexible “Program” design to meet “LEA” priorities and the needs of P-12 students while aligning to state and “IHE” requirements for clinical practice.
- O. Create or revise course content, as needed, and craft a schedule of classes with qualified instructors in conjunction with the “LEA’s” Academic Calendar and facilities availability.
- P. Reduce out-of-pocket costs for candidates by lowering tuition rates and waiving many additional fees.
- Q. Collaborate with “LEA” administrators in the selection of mentors for each candidate and provide training, stipends, and support for mentors.

Key roles, responsibilities, and timelines

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In order to accomplish the objectives of this MOU and meet “Program” outcomes, the “LEA” and “IHE” shall perform the specific duties as outlined in this document. The understanding is that the information may be subject to change based upon “Program” needs, agreed upon by all partners.

Activity	Start date	End date	Responsibility <i>(Indicate if it is “LEA,” “IHE,” mentor, candidate, etc. and indicate the name, organization, and title as applicable.)</i>
Candidate recruitment			
Candidate screening			
Candidate selection			
Field placement			
Student teaching placement			
Mentor selection			
Mentor training			
Course delivery			
Candidate advisement			
[Add rows as needed]			

Financial arrangements

[IHE or LEA] will act as the “Program’s” fiscal coordinator to distribute all funding.

Expense	Cost	Disbursement Date	Responsibility <i>(Name and Title)</i>
Mentor Stipends			
Candidate Salaries			
[Add rows as needed]			

Cost to Candidates

A candidate’s cost for tuition is discounted to **[total tuition cost]**. Tuition is partially funded through **[funding source(s)]** (**[funding amount]**) leaving the candidate’s tuition cost at **[amount]** per **[semester, quarter, or academic year]**. Additional costs associated with obtaining the **[degree]** (e.g. graduation, certification application and exams) will be the responsibility of the candidate and could possibly be supplemented through other resources from the “Program.” Each candidate must pass appropriate coursework and state-required exams to be recommended for certification

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Tuition Comparison

The total tuition and campus-based fees for other “IHE” certification degree programs for **[number of semesters]** and **[number of credits]** is **[total tuition costs for non-Program candidates]**.

Item	Cost	Paid By <i>(Indicate if it is “LEA,” “IHE,” candidate, loan funding, etc.)</i>
Registration fee		
Application fee		
“Program” tuition		
Course textbooks		
Certification exam fee		
Graduation fee		
[Add rows as needed]		

Effective dates

This MOU is effective beginning **[date]**. The MOU may be amended by a written addendum signed by all parties. The authorizing signatories for this MOU are as follows:

Authorized signatures

The following shall be the contact person for all communications regarding the performance of this MOU.

	“LEA”	“IHE”
Name		
Title		
Email Address		
Phone Number		
Mailing Address		

“LEA” Signatures

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Name	Title	Signature	Date

"IHE" Signatures

Name	Title	Signature	Date