MEMORANDUM OF UNDERSTANDING

Between

[School District Name]

And

[County Jail Name]

And

[**BOCES Name]**

Whereas, the **[School District Name]** ("District") is a public school district providing educational services to its residents pursuant to the Education Law of the State of New York; and

Whereas, the District receives Title I, Part A and/or D funding from the United States Department of Education the New York State Education Department (NYSED) to support collaboration among the District, the **[County Jail Name]**, and [**BOCES Name]** to carry out high quality education programs to prepare incarcerated youth for secondary school completion, training, employment, or further education and to facilitate the transition of youth from the correctional program to further education or employment; and

Whereas, the parties hereto wish to clarify the roles of each in a collaborative effort to efficiently serve youth within the care of all three agencies;

Now, therefore, the parties acknowledge as follows:

1. The District will perform the following tasks:

    a. Act as the Local Educational Agency (LEA) for Title I A and/or D Funding.
    b. Contract with [**BOCES Name]** Adult Literacy Program for the administration, supervision, and delivery of the incarcerated youth program at the **[County Jail Name]**.
    c. Take title to all equipment and supplies purchased with the Title I funds and arrange for [**BOCES Name]** and **[County Jail Name]** to make use of such property in the furtherance of the educational programming.

2. [**BOCES Name]** will perform the following tasks:

    a. Administer and supervise the Title I-D educational programming at the **[County Jail Name]**.

    b. Operate classrooms at **[County Jail Name]** to ensure that high-quality educational services prepare the incarcerated youth for secondary school completion, vocational training, transitioning to employment, and the facilitation of the release of the youth into additional community services.

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c. Ensure that all of its educational activities adhere to all safety and security guidelines established by **[County Jail Name]** administration.

d. Employ staff and provide classroom equipment, supplies, and materials for the educational programming at the **[County Jail Name]**.

e. Communicate on a regular basis, and as requested by the District, with District counselors and teachers of delinquent youth in order to provide a continuum of educational services necessary for the completion of program requirements.

f. Ensure proper record-keeping and documentation of student files and fiscal records.

3. The **[County Jail Name]** will perform the following tasks:

   a. Assume responsibility for the security and safety of all participants in this educational programming, including incarcerated youth, instructors, officers, and any outside staff providing services.

   b. Present security and safety training to all [**BOCES Name]** staff and monitor programming daily.

   c. Provide on-site supervision of educational programming and [**BOCES Name]** staff in relation to safety and security.

   d. Provide access to appropriate classroom and instructional space for the safe delivery of the educational program.

   e. Provide inmate referrals to the educational programming and coordinate daily transferring of youth to programming.

   f. Provide incarceration information and data on participants as required by program reporting.

   g. Communicate on a regular basis with the [**BOCES Name]** Adult Literacy Supervisor in order to facilitate educational programming and address issues and concerns.

4. The parties further acknowledge that each party will provide its services as required by law and that this Memorandum of Understanding is not meant to create any obligations that replace, diminish, augment, or supersede any party's legal obligations.

5. This Memorandum is effective for the period _____, through _____.

6. The parties adopt this Memorandum of Understanding by the signatures set forth below.

SAMPLE

_____

LEA Name

_____

[*Name/Title*] (District Representative)

_____

Date Signed

_____

[Facility/Agency Name]

_____

[*Name/Title*] (Facility/Agency Administrator)

_____

Date Signed

_____

BOCES Name

_____

[*Name/Title*] (BOCES Representative)

_____

Date Signed

SAMPLE