Sample Memorandum of Understanding – Foster Youth to Independence

***[\*\* This sample document demonstrates the partnership agreement requirements of PIH Notice 2019-20 (HA). \*\*]***

*This Memorandum of Understanding (MOU) has been created and entered into on* ***[\*\* Insert execution date \*\*]*** *by and between the following parties in relation to their request for assistance under the Foster Youth to Independence initiative and the requirements of PIH Notice 2019-20 (HA).*

[PHA Name and Address]

[PCWA Name and Address]

[CoC Name and Address]

***[\*\*Include only if the CoC will be a party to the agreement\*\*]***

1. Statement of Cooperation ***[\*\*Optional\*\*]***
   1. Commitment to administering the program.
   2. Goals and standards of success in administering the program.
   3. Identification of staff position at the PHA, PCWA, and CoC ***[\*\*Include CoC staff position only if the CoC will be a party to the agreement\*\*]*** who will serve as the lead FYI liaisons.

Lead FYI Liaison:

Name and title of PHA staff position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name and title of PCWA staff position:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and title of CoC staff position:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Youth Eligibility ***[\*\*Required\*\*]***

The population eligible to be assisted under this agreement are youth certified by the PCWA as meeting the following conditions:

1. Has attained at least 18 years and not more than 24 years of age;
2. Left foster care, or will leave foster care within 90 days, in accordance with a transition plan described in section 475(5)(H) of the Social Security Act at age 16 or older; and
3. Is homeless or is at risk of becoming homeless as these terms are defined at 24 CFR 578.3 and 24 CFR 576.2.

Eligibility is not limited to single persons. For example, pregnant and/or parenting youth are eligible to receive assistance under this notice assuming they otherwise meet eligibility requirements.

1. Supportive Services ***[\*\*Required\*\*]***

***[\*\*Insert name of supportive service provider(s)\*\*]*** will provide the following supportive services for a period of 36 months to youth assisted through this program. Youth will not be required to participate in these services as condition of receipt of the voucher.

1. Basic life skills information/counseling on money management, use of credit, housekeeping, proper nutrition/meal preparation, and access to health care (e.g., doctors, medication, and mental and behavioral health services).
2. Counseling on compliance with rental lease requirements and with HCV program participant requirements, including assistance/referrals for assistance on security deposits, utility hook-up fees, and utility deposits.
3. Providing such assurances to owners of rental property as are reasonable and necessary to assist a FUP-eligible youth to rent a unit with a voucher.
4. Job preparation and attainment counseling (where to look/how to apply, dress, grooming, relationships with supervisory personnel, etc.).
5. Educational and career advancement counseling regarding attainment of general equivalency diploma (GED); attendance/financing of education at a technical school, trade school or college; including successful work ethic and attitude models.

***[\*\*The MOU may include additional services beyond those listed above (A – E)\*\*]***

1. PHA Responsibilities ***[\*\*The following elements, listed in A. – C., are required\*\*]***

The ***[\*\*Insert PHA name\*\*]*** will be responsible for the following activities:

1. Accept referrals of youth certified by the PCWA as eligible for assistance under this notice.
2. Determine if youth referred by the PCWA are eligible for HCV assistance.
3. Amend the administrative plan in accordance with applicable program regulations and requirements, if needed.
4. PCWA Responsibilities **[\*\*T*he following elements, listed in A. – D., are threshold requirements*\*\*]**

The ***[\*\*Insert PCWA name\*\*]*** will be responsible for the following activities:

1. Have a system for identifying FUP-eligible youth within the agency’s caseload and review referrals from the PHA and CoC.
2. Have a system for prioritization of referrals to ensure that youth are prioritized for a FYI TPV based upon level of need and appropriateness of the intervention.
3. Provide written certification to the PHA that a youth is FUP-eligible.
4. Provide or secure a commitment for the provision of required supportive services.
5. CoC Responsibilities ***[\*\*Include only if the CoC will be a party to the agreement\*\*]***

The ***[\*\*Insert CoC name\*\*]*** will be responsible for the following activities:

1. Integrate the prioritization and referral process for FUP-eligible youth into the CoC’s coordinated entry process.
2. Identify services to be provided using CoC program funds to youth who qualify for CoC program assistance.
3. Make referrals of FUP-eligible youth to the PCWA.

Signed By:

Executive Director, PHA Date

Executive Director, PCWA Date

Executive Director, PCWA contractor organization ***[\*\*If applicable\*\*]***  Date

Board Chair, CoC ***[\*\*If applicable\*\*]***  Date