## Memorandum of Agreement (MOA): Healthy Relationships Bay County & Collaborative Partner Organizations

Healthy Relationships Bay County (HRBC) is a county-wide cross-sector coalition and collaboration of faith-based and community-based organizations. We invite your organization to become a collaborative partner in support of our Bay Youth Healthy Relationships and Pregnancy Prevention (BYHRPP) federal grant application (AH-TP1-23-001) which seeks to "flood the market" of Bay County with high quality state-of-the-art Youth Programming offered through a multi-sector Community Saturation Model. This MOA documents the roles, responsibilities, resources, activities, and contributions each partner would provide in the event our application is successful in securing federal grant funding starting July 1, 2023. A more detailed MOA will be developed if the project is funded.

## **Collaborative Partners Commitments**

- Agree to be listed as one of our Collaborative Partners in our BYHRPP project federal grant application.
- Provide youths (ages 10-24) from your organization to participate in one or more Evidence Based Programs (EBPs) focused on Healthy Relationships, Teen Pregnancy Prevention, and/or Positive Youth Development.
- Provide input into the selection of the specific EBP(s) to be implemented at your site based on what is the best fit for the youth you plan to serve. The evaluation and selection of the EBPs will take place during the initial 6-month grant Project Planning period.
- Provide adequate space at your organization for the youth to participate in one or more EBP curricula.
- Help identify and recruit youth, especially those who are disadvantaged or marginalized, to serve on the Bay Youth Leadership
  Council, where they will be involved as respected, equal partners and decision makers to inform the design, implementation, and
  monitoring of the project.
- Help identify, recruit, and engage parents, caregivers, and other trusted adults from your organization who are willing to be engaged
  and supported through this youth-focused project. Their involvement will add value to this project by providing insight into the fit of
  the proposed EBP program for your specific community, and they will benefit by receiving guidance and education that will equip
  them to support their youth in making healthy decisions.
- Support the collection of required performance measurement data (i.e., attendance sign-in sheets and student feedback forms) to monitor progress towards approved project goals and objectives and inform continuous quality improvement.

## **Healthy Relationships Bay County Commitments**

- Identify, recruit, train, and certify adult facilitators to teach one or more EBP curricula.
- Provide all materials, leader kits, and handouts needed for any EBP course for both youth participants and class facilitators.
- Provide guidance and education to parents, caregivers, and other supportive adults that aims to support them as they develop and maintain positive relationships with youth and encourage healthy decision-making.
- Provide documentation of student participation through compilation of attendance sign-in sheets & student feedback forms.
- Foster collaboration and data-sharing between implementation staff, evaluation staff, and other partners.
- Provide linkages & referrals to supportive services to youth, parents, caregivers, and other supportive adults as opportunities arise.
- Compensate Collaborative Partners for graduates they provide, at a rate between \$10 to \$40 per graduate, depending upon length
  of curriculum and which of the following services they provide: location (\$10), participant recruiting/referrals (\$10) and/or facilitator
  (\$20). Details will be worked out during first 30 days of planning period, at which time a formal MOU will be executed.

| This agreement may be canceled at any time    | e by either party for any  | y reason with 10 days w   | ritten notice.      |                      |
|---|----------------------------|---------------------------|---------------------|----------------------|
| Collaborative Partner Organization (Please    | PRINT):                    |                           |                     |                      |
| Estimated # of Youth we have access to and    | d who would likely partion | cipate in an EBP per yea  | ar by age category: |                      |
| # Youth we have access to:                    | Ages 10 to 14              | Ages 15 to 19             | Ages 20 to 24       | Total                |
| # Youth we plan to serve per grant year:      | Ages 10 to 14              | Ages 15 to 19             | Ages 20 to 24       | Total                |
| Roles we would likely provide (check all that | apply):   Location for     | classes                   | refer participants  | ☐ Provide facilitato |
| Estimated # of Parents/Caregivers of Youth A  | ages 10 to 24 we have a    | access to:                |                     |                      |
| Please PRINT Name and Title of Authorized     | Signature:                 |                           |                     |                      |
| Authorized Signature:                         |                            |                           |                     |                      |
| Date Agreement signed:                        |                            | , 2023                    |                     |                      |
| Please sign this MOA and email it Logan@Lir   | veTheLife.org. Question    | ns? Call Logan Kelly at ( | 850) 832-3291       |                      |