 **AmeriCorps\*VISTA Public & School Partnership**

**2017-2018 Supervisor Memorandum of Agreement**

As a site supervisor I understand and agree to the following terms in regards to the Public and School Partnership AmeriCorps VISTA Program. I will: (please check each box)

* Submit any cost-share invoices to the accounting office for payment no later than September 30th 2016.
* Provide a safe and professional work environment.
* Provide management and oversight of VISTA activities.
* Provide necessary training and on-site orientation.
* Make allowances for approved VISTA member personal and medical leave (10 days each).
* Make allowances for member attendance at all mandatory training and service projects hosted by PSP & the Corporation for National & Community Service.
* Complete VISTA member evaluations and feedback forms by the requested date.
* Make introductions at staff meetings that accurately represent the VISTA member work scope and position at the site.
* Encourage and provide space for AmeriCorps\*VISTA and Public & School Partnership branding on materials and in the VISTA member work space.
* Ensure VISTA members remain focused on capacity building activities that benefit the longevity and increased effectiveness of the site, instead of on direct service activities that do not contribute to the overall capacity of the site.
* Where possible, to fulfill grant requirements, provide VISTA members the opportunity to work on programs that directly or indirectly impact students and families in poverty.
* Where possible, provide VISTA members the opportunity to work with volunteers (recruiting, training, coordinating, or recognizing).

Additionally, I agree that I have read and will support the following statements to the best of my ability: (read and initial)

The continued success of the PSP VISTA program is dependent on members completing their one-year service commitment. Failure of members to complete service terms may negatively impact PSP’s future grant funding; additionally, it causes the VISTA member to lose important end-of-service benefits (education award, noncompetitive eligibility status, etc.).

As a VISTA supervisor I agree to prioritize completion of VISTA member terms. I will not offer employment to any VISTA member that would begin prior to the completion of the service term; additionally, I will refrain from encouraging a VISTA member to accept or apply for employment that may interfere with the completion of the service term. \_\_\_\_\_\_\_\_\_\_\_\_\_ (initial)

VISTA members are absolutely prohibited from participating in any activity designed to influence the outcome of an election or influence legislation. VISTA members also may not participate in any political activity while identifying themselves or their program with AmeriCorps VISTA. (See the Hatch Act for more information.) As a supervisor I agree to abide by this agreement and to not ask the VISTA member to participate in these activities. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (initial)

By signing this MOA I agree to abide by the terms and conditions outlined above. I also understand that cost-share contributions will go into a USU match account where they may be used at the discretion of PSP to support administrative costs, member living allowances, training needs, administrative support, supplies, travel, recognition, and other needs as necessary.

\*PSP reserves the right to remove the VISTA member from the service site if these terms are not met. In this unlikely event, cost-share payments will be prorated.

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Site Supervisor Signature Date VISTA Program Staff Signature Date

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(printed name) (printed name)