

_____ **School District**
Memorandum of Understanding
Sheltering and Mass Care Facilities

This agreement is made and entered into between the XYZ Area School District and <Name of the Facility> to establish shelter site locations and terms of use in the event of an evacuation of the students and staff of the XYZ Area School District.

The XYZ Area School District will make every effort to notify <Name of the Facility> of evacuation possibilities with as much notice as possible. Contact information between the two parties shall be maintained in a separate appendix and is considered confidential information and is not subject to public disclosure.

<Name of the Facility> agrees to open their building located at <Physical Address of the Facility> to provide shelter and assistance to students and staff evacuated during emergency situations when the students and staff have a need to be sheltered. <Name of the Facility> has a capacity to accommodate approximately <Number> people.

<Name of the Facility> understands that their organization will be responsible for opening the building and developing procedures for making the building accessible, including rest rooms and an area with phone and internet connection (if available) for XYZ administrative personnel. Furthermore, XYZ Area School District will provide supervision for all students and staff during the time that the facility is used as an emergency shelter site.

The XYZ Area School District agrees that it shall exercise reasonable care in the conduct of its activities in said facilities and further agrees to replace or reimburse <Name of the Facility> for any items, materials, equipment or supplies that may be used by the district in the conduct of its sheltering activities in said facilities.

The XYZ Area School District will be responsible for replacing, restoring or repairing damage occasioned by the use of any building, facilities or equipment belonging to <Name of the Facility>.

The XYZ Area School District will reimburse <Name of the Facility> for any bona fide expenditure of personnel required to maintain the facility, including overtime costs, upon production of receipts or time sheets. The XYZ Area School District will not pay any operational or administrative fees to <Name of the Facility>.

The XYZ Area School District shall provide any and all releases of information to the press and media. Requests for interviews or information submitted to <Name of the Facility> shall be directed to the XYZ Area School District's Public Information Officer or the Superintendent of Schools.

The XYZ Area School District will make every effort to recognize the hospitality of <Name of the Facility> in any press or media releases pertaining to the re-location and sheltering of students and staff.

Nothing in this MOU is intended to conflict with current laws or regulations of the United States of America, the State of _____, or local government. If a term of

this agreement is inconsistent with such authority, then that term shall be invalid, but the remaining terms and conditions of this MOU shall remain in full force and effect.

This agreement shall become effective on <insert effective date> and may be modified upon the mutual written consent of the parties.

The terms of this agreement, as modified with the consent of both parties, shall be self-renewable for a period of five (5) years from the end date of the agreement unless written termination is given by either party. Either party, upon sixty (60) days written notice to the other party, may terminate this agreement.

The terms of this agreement, as modified with the consent of both parties,
AND NOW, this _____ day of _____ 20____, the parties hereby
acknowledge the foregoing as the terms and conditions of their understanding.

Superintendent of Schools, XYZ District

Authorized Signature, Facility

Date

Date

School District
Memorandum of Understanding
Sheltering and Evacuation Contact Information
Confidential – Not for Public Disclosure

School District Building:

Address:

Phone:

Fax:

Principal:

Alternate:

Alternate:

Email:

Email:

Email:

Phone:

Phone:

Phone:

Cell:

Cell:

Cell:

Approximate

Number of Students:

Number of Staff:

Evacuation Route from School to Shelter Site:

Student Pick-Up Point:

Bus:

Parent/Guardian:

Special Needs of Students/Staff:

Please attach additional planning or operational procedures to this form.

Host Facility:

Address:

Phone:

Occupancy Capacity:

Fax:

Contact Person(s)

1st Name:

Email:

Address:

Phone:

Cell:

2nd Name:

Email:

Address:

Phone:

Cell:

3rd Name:

Email:

Address:

Phone:

Cell: