

Pre-Application Memorandum of Understanding

Pending full and final approval of the network concept paper and application by the CNCS State and National Offices, the Participating Agency agrees to:

1. Allow and ensure that appropriate project staff and VISTA members attend all CNCS/VISTA sponsored meetings and events.
2. Recruit, interview, check references, conduct required background checks, and complete required paperwork recommending candidates for selection as VISTA members.
3. Provide On Site Orientation and Training (OSOT) as required by CNCS. Provide additional in-service instruction and special training for member(s) as needed.
4. Discuss VISTA Assignment Description with member and provide them with a position description highlighting their specific activities and duties. A current VAD must be on file at all times with the Plantory.
5. Provide appropriate office space. Furnish members with any materials required for assignments (ie. books, paper, desk, computer, files, phone, access to copier, etc.)
6. Contribute between \$3000 and \$5500 (based on organizational budget and capacity) per member slot to the consortium as invoiced to cover the cost share and other network dues. This amount is subject to change slightly in the case that new expenses arise during year that are agreed to by VISTA Advisory Board, host agency, or partner agencies, or new expenses are assigned by CNCS itself. This should be paid by date provided on invoice. Payment guarantees a slot, not member placement; member recruitment is up to the Participating Agency.
7. Check reports completed by VISTAs for accuracy each month.
8. Provide for reasonable health and safety accommodations for members. The site shall not assign or require members to perform duties which would unduly jeopardize their safety or cause them to sustain injuries.
9. Report to the project sponsor within 12 hours any unscheduled changes of status and conditions of members, such as resignations, arrests, hospitalizations, and absences without leave.
10. Sign VISTA member's service log. Compile, verify, and submit members' service logs with an authorized signature twice each month (the middle and the end).
11. Allow member to attend training opportunities.
12. Provide confidentiality training for all members in accordance with site specific policies and procedures.
13. Provide mileage reimbursement or transportation on the job travel, as agreed to with member in CNCS transportation document.
14. Submit required completed paperwork to The Plantory on a timely basis. Ensure that members complete reports accurately and on time.
15. Provide for on-going supervision of members through on-site observation, weekly check-in meetings with member, project meetings, staff meetings and monitoring of hours reported on service log.

16. Accept full responsibility for the oversight of members required to handle any financial transactions of the site.
17. Investigate and report accidents and injuries involving VISTA members to the Plantory. All reports shall be submitted in writing to the network supervisor.
18. If circumstances require, advance up to \$500 to any member in case of emergency (e.g. critical illness or death in the immediate family) to be reimbursed by CNCS if allowable according to VISTA guidelines.
19. Allow and encourage members to participate in CNCS Days of Service (ie. MLK Day, National Volunteer Week, Make a Difference Day, and any emergency local disaster relief).
20. In the event that a VISTA member terminates early from a site, full participation in VISTA site supervisor meetings, the reporting process, cost-share payment, and other consortium activities is expected through the end of the grant year. If a member terminates early, the participating agency is not permitted to fill the empty slot with a new member unless the CNCS State Office gives permission otherwise.
21. Submit signed Memorandum of Understanding in a timely manner in order to guarantee reserved slot in network.
22. Remain in communication with VISTA network host agency, Advisory Board, VISTA Leader, and State Office throughout grant year and VISTA service.
23. Follow all CNCS and VISTA network guidelines and policies.
24. Be a positive, supportive partner for the member, the Plantory, CNCS, AmeriCorps, and partner agencies.

VISTA Participating Agency

Address

City

State

Zip

Phone Number

Website

Email

VISTA site representative who will serve as liaison with The Plantory and who will be responsible for VISTA supervision:

Name	Title
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Signature	Date
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Phone	Email
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Secondary site contact in case above-listed supervisor is absent:

Name	Title
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Signature	Date
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Phone	Email
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Values Statement

The members of the Plantory's VISTA community are committed to using fairness, transparency, respect, and flexibility to guide our work and interaction. The Plantory VISTA network seeks to go beyond cooperation to a place of true collaboration and innovation in our joint pursuit of our social missions. Everyone needs to feel welcome, comfortable and empowered while we work together to improve ourselves, our organizations, and our communities.

Community Agreement

1. We agree to actively maintain and contribute to a safe, positive, welcoming, and inclusive environment, recognizing that safety and inclusion take different forms for different people. We agree to be as considerate as possible to others' experiences.
2. We agree to respect and actively listen to others, openly and honestly engage with the Plantory VISTA network community, and consider views that are different from ours, even if it is difficult to do so. We will not proselytize our views through words or actions, but will engage in an authentic exchange with everyone.
3. When we disagree with a person or an idea, we will respectfully do so. Disagreements will be approached with the appropriate people in the proper time and place. We agree to be solutions-focused, and to recognize that discomfort and disagreement help us learn and grow together.
4. We agree that equity pertains to all people with NO exceptions. We will respect and welcome everyone.

VISTA Participating Agency

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Name

Title

Signature

Date

Secondary site contact in case above-listed supervisor is absent:

Name

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Signature

Date