



**HOWARD COUNTY PUBLIC SCHOOL SYSTEM
EDUCATIONAL PARTNERSHIP DECLARATION**

between

[Organization]

and

[School (or HCPSS office)]

Vision

The vision of the partnership between [Organization] and [School] is to ... [Insert brief description of ultimate goal(s) that the partnership will help to achieve, usually tied to school improvement plans, curricular objectives, or system-wide goals.]

Mission

[Organization] and [School] will ... [Insert brief summary of the ways the partnership will achieve the above mission.]

Objectives

[Organization] will

- [List specific activities here.]
- Consider sponsoring school activities when appropriate.
- Meet at least yearly to evaluate the partnership against measurable evaluation criteria and revise the agreement as warranted.
- Follow all Howard County Board of Education policies and procedures.

[School] will

- [List specific activities here.]
- Meet at least yearly to evaluate the partnership against measurable evaluation criteria and revise the agreement as warranted.
- Recognize the [Organization] partnership in school newsletters, on the school web site, and at various events and venues throughout the school year.
- Issue a press release to announce the formation and signing of a partnership between [Organization] and [School].
- Invite [Organization] to participate in the Howard County Public School System Employee Incentive Program.
- Invite [Organization] representatives to the Howard County Public School System Annual Partnership Celebration.

- Recognize the partnership between [Organization] and [School] in the *Howard County Public School System Educational Partnerships Annual Report*.
- Follow all Howard County Board of Education policies and procedures.

HCPSS welcomes the opportunity to partner with many types of businesses and organizations. A partnership, however, does not constitute promotion or endorsement by HCPSS for any partner's causes, ideas, web sites, products, or services.

We, the following, do fully agree to the above stated partnership agreement between [*Organization*] and [*School*] on this the [*date*] day of [*Month*] in the year *2008*. The agreement shall remain in effect until such time that either party provides 10 days notice of its intent to terminate the partnership.

[Name, Title]
Howard County Board of Education

[Name, Title]
[Organization]

Sydney L. Cousin, Superintendent
Howard County Public Schools

[Name], Principal
[School]

[Name], Partnerships Office
Howard County Public Schools