

MEMORANDUM OF UNDERSTANDING (MOU)

This agreement is between Thorn Hill Education Center (First Party) and (Second Party) Bourbon County Board of Education for the period beginning July 1, 2025 through June 30, 2026. The parties hereby bind themselves to undertake a Memorandum of Understanding (MOU) to include the terms below, but not limited to the additional changes or directives dictated by the Education and Workforce Development Cabinet, Kentucky Adult Education Skills U.

TERMS:

Initial grant year **July 1, 2025 – June 30, 2026; Sum of this year grant will be \$70,000.**

Provisional Title II, Adult Education and Family Literacy Act (AEFLA) and state application (RFA) grant award (grant year July 1, 2025–June 30, 2028: 3-year RFA grant award) will be for the service area comprised of the following grantee counties:
Bourbon, Franklin, Jackson

The **First Party** will retain duties as the fiscal agent and Program Director of grant.

The **Second Party** will attend any KYAE Training that is deemed appropriate by the **First Party** and will attend, no less than quarterly meetings at the request of the **First Party** at the location designated by the **First Party** (Frankfort, Thorn Hill Education Center).

The **First Party** will review the **Second Party's** monthly expenditures and submit them to KYAE, no later than 5 days after receiving them from the Second Party (10th of each month).

The **Second Party** will electronically submit monthly expenditures to the **First Party** by the 5th of each month. The **First Party** will send any reimbursement check to the **Second Party** within 3 days of receiving the reimbursement from KYAE.

Fiscal agents have the discretion to budget the appropriate amount (Core/Federal Supplement/Performance) by county according to demand for service. As a reminder, Core Service administrative funds are capped at 20% and operations funds are capped at 5% of Core Service funds. KYSU Innovation funds administrative funds are capped @ 5%

The **Director** will visit each **Second Party** location at least two times per year, or as deemed necessary.

The **Director** will be in contact with the **Lead Teacher** on a weekly/or daily basis depending on the program needs in the **District**.

Superintendent Signature

Date



Fiscal Agent (Thorn Hill) Signature



Date