

Partnership Agreement

Date: [Insert Date]

Between:

[Your Organization Name]

[Address]

[City, State, Zip Code]

And:

[Social Services Organization Name]

[Address]

[City, State, Zip Code]

Introduction

This Partnership Agreement ("Agreement") is entered into by and between [Your Organization Name] and [Social Services Organization Name] to collaboratively provide effective social services to the community.

Objectives

1. To enhance the delivery of social services.
2. To share resources and expertise.
3. To conduct joint outreach programs.

Responsibilities

- [Your Organization Name] shall be responsible for [list responsibilities].
- [Social Services Organization Name] shall be responsible for [list responsibilities].

Duration

This agreement shall commence on [start date] and continue until [end date], unless terminated earlier by either party.

Signatures

[Name, Title]

[Your Organization Name]

[Name, Title]

[Social Services Organization Name]