Attachment A

Title



Division of Continuing Education & Economic Development

Memorandum of Understanding (MOU) Non-Credit Instruction/Consulting

This MOU serves as authorize	ation for Volunteer S	tate Community	College. Institution to	provide the following for,
Company.				,
Program Title/CEUs(if				
applicable):				
Description:				
Instructor(s):				
Date(s) and Time(s):				
Location:				
Number of Participants:				
Program Fee:	There are no refunds	for individual en	rollments once the work	cshop has begun.
owner of all instructional mathe instruction or copy writte If applicable, a recommendation of Continuing Educe This agreement material of termination of termination of termination of termination of termination of termination of the instruction of termination of the instruction of termination of the instruction of	n materials to be used or on materials unless other ord of CEUs earned war. For training that in ation. The training that in ation.	developed for the erwise agreed in vill be maintained avolves CEU creations are party by ginstitution shall be termination date	Program. The Comparwriting by Institution. d by Institution for indidit, a transcript of recoiving written notice to e entitled to receive juste to include such cost	agrees that the Institution is the sole ny is not permitted to video/audio tape ividuals who complete the Non-Credit rd may be obtained by contacting the the other at least 14 days before the st and equitable compensation for any s as consultative time, preparation of
Payment by Credit Card:				Payment by Purchase Order –
				Invoice Requested:
Check one: Visa	Mastercard	_ Expiration I	Date	Purchase Order
Credit Card #:				Number:
Print Cardholder's Name:				
Cardholder's Signature:				
Invoice Requested: Company agrees to make payment for services rendered within 30 days of receipt of an invoice. Payments not received within thirty days of receipt of invoice will be delinquent and subject to collection in accordance with TBR and Institution policies and guidelines, including referral to a collection agency. Company agrees to pay all collection costs incurred by Institution.				Payment by Check in Advance of Scheduled Instruction/Consulting
otherwise subjected to disci Company on the grounds of protected by applicable feder Tennessee law. The Company will	rimination in the perf f disability, age, race, eral or Tennessee law provide the Instituti	formance of this color, religion, so The Institution on advance noti	MOU or in the emplosex, national origin, vet and Company shall conce of any special according	ipation in, be denied benefits of, or be byment practices of the Institution or teran status or any other classification omply with all applicable federal and ommodations required by any course provide special accommodations under
Signature of Company Offici Address	al	Date	Signature of Institut 1480 Nashville Pike	ion Official Date , Gallatin, TN 37066
Please print name			Please print name Vice President for A	academic Affairs

Title