

PARTNERSHIP AGREEMENT

Between

Sparkles of Hope Christian Ministries' Prism Pathway Program
and

[Partner Organization Name]

This Partnership Agreement (the "Agreement") is made on _____ between:

Sparkles of Hope Christian Ministries (SOHCM), operating the Prism Pathway Program

Address: 2908 Indiana Ave.

Kansas City, MO. 64130-2031

Contact: Pastor Billy McClinton

Phone: 747-377-2755

Email: prismpathwayprogram@sohcm.org

and

[Partner Organization Name]

Address: _____

Contact Name: _____

Phone: _____

Email: _____

1. PURPOSE

This Agreement establishes a partnership to support at-risk and justice-involved youth through the Prism Pathway Program.

2. PARTNERSHIP DURATION

Initial Term: Start Date _____ to End Date _____

Renewal Terms: Specify renewal terms _____

3. PARTNER RESPONSIBILITIES

[Partner Organization Name] agrees to:

- Provide mentorship opportunities
- Offer job training placements
- Facilitate educational programs
- Contribute facilities/space
- Share expertise/resources
- Other: [Specify] _____

4. SOHCM RESPONSIBILITIES

SOHCM agrees to:

- Provide program coordination
- Ensure participant screening and preparation
- Maintain communication protocols

- Track and report outcomes
- Acknowledge partner contributions
- Provide necessary support and training

5. JOINT RESPONSIBILITIES

Both parties agree to:

- Regular communication
- Quarterly review meetings
- Data sharing as agreed
- Joint problem-solving
- Collaborative evaluation

6. TERMS AND CONDITIONS

Detail specific terms regarding liability, confidentiality, termination, etc. _____

7. SIGNATURES

For SOHCM:

For Partner Organization:

Date: _____

Date: _____