1395 Bancroft Avenue
San Leandro, CA 94577
(510) 357-0205
Fax (510) 357-0688
www.bfwc.org
24Hr Crisis Line (866) A-WAY-OUT

Operational Agreement

This Operational Agreement stands as evidence that **Building Futures** and **San Leandro Unified School District (SLUSD)** intend to work together toward the mutual goal of providing maximum possible assistance for victims of interpersonal violence residing in Alameda County. To this end, **San Leandro Unified School District** agrees to refer clients in need of crisis interventions, counseling, advocacy, and shelter to **Building Futures** which will provide the following services (as space is available in the shelters):

1. To provide 24 hour crisis line response;
2. To provide emergency shelter for victims and their children, providing them with food, clothing, and emergency transportation;
3. To provide case management, peer group counseling, and follow-up services for battered women who reside at our emergency shelters;
4. Community Resources and Referrals.

San Leandro Unified School District agrees to provide the following services:

1. Select and employ a McKinney-Vento Program Coordinator who will oversee the grant and all aspects of the SLUSD program to meet the needs of homeless students and families;
2. The SLUSD Coordinator will meet regularly with BFWC, community agencies, and the school sites to maximize coordination of services, create more effective support systems, and monitor student progress;
3. Generate reports that will help monitor student attendance, behavior, and academic data;
4. Work with the BFWC case managers and the school sites to ensure that services and supports are coordinated and effectively address the needs of our students.

We, the undersigned, as authorized representatives of **Building Futures** and **San Leandro Unified School District,** do hereby approve this document for the time of the latest signature date through December 31, 2019.

Name: Liz Varela

Title: Executive Director

For: Building Futures

Signature: _____

Date: _____

Name: _____

Title: Superintendent

For: San Leandro Unified School District

Signature: _____

Date: _____