

Fire MOU Partnership Initiation Form

FS Agreement No. 16-MU-11052012-148

Date:

Name: (individual, organization, agency)

Purpose: The purpose of this Fire MOU is to document the cooperation between the parties to increase the use of fire to meet ecological and other management objectives in accordance with the provisions of the MOU initially signed in the fall 2015.

Your Organization's Mission:

Statement of Interest: (optional) What brought you or your organization to join the Fire MOU Partnership?

Statement of Support: By joining the Fire MOU effort, you and your organization are committing to constructively engage in and support efforts that will achieve the purposes of the MOU stated above. There are options for general engagement and/or in various work groups.

Work Groups identified in our initial planning session: (see Feb 2-3-16 meeting notes)

Policy

Capacity

Outreach and Education

Organization's Program Contact Name and Contact Information: Individual(s) listed below are authorized to act in their respective areas on matters related to this agreement.

MOU Partner Program Contact	MOU Partner Administrative Contact
Name:	Name: (if different than program contact)
Affiliation:	Affiliation:
Address:	Address:
Telephone:	Telephone:
Email:	Email:

*Anticipate a follow-up contact from the Forest Service Grants and Agreement's staff to obtain your organization's formal signature on the MOU.