

Mississippi Library Commission FY2024 LSTA SUBGRANT APPLICATION



This form must be completed using Adobe Reader.

By submitting this application you certify: 1) You are authorized by the entity named below to act on its behalf regarding submission of this project 2) You are authorized to make changes to the project if necessary 3) You are the Library Director and/or Project Director.

APPLICANT INFORMATION		
Library/Library System		
Address	City	Zip Code
Phone Number	UEI	
Project Director - First Name Project	t Director - Last Name E-Mail Address	
PROJECT INFORMATION		
Project Title		
Project Abstract (a high overview of the	project)	
Intended Outcome (choose a Focal Area and then one of the Intents) See Key Terminology on the web page for more information Lifelong Learning		
Information Access		
Institutional Capacity		
Economic & Employment Develo	ppment	
Human Services		
Civic Engagement		
Project Need Assessment (What are	the conditions now and how will this project help increase	your desired conditions?)

Project Description (Detail of how you will carry out the project from start to finish)		
Project Partners (Do you have any project partners? If so, please list.)		
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Project Evaluation (How will you evaluate the success/failure of this project?)		
Project Goals (What do you hope to accomplish in the end?)		
PROJECT BUDGET INFORMATION		
Consultant Fees Budget Amount		

Supplies/Materials/Small Equipment (Items under \$5,000 a piece)

Budget Amount

Equipment (Items over \$5,000 a piece)

Budget Amount

PROJECT BUDGET SUMMARY

Consultant Fees

Services / Contractual

Supplies/Materials/Small Equipment

Equipment

Total Project Cost

PROJECT BUDGET FUNDING

<u>Funding Source</u> <u>Amount</u>

LSTA Funds Requested

FAIN: LS-253636-OLS-23 FAD: 2/9/2023

This application must be submitted as an email attachment in .pdf format to: grantsprog@mlc.lib.ms.us. To submit now, click the button below.