

Mississippi Library Commission FY2026 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 this project if necessary 3) You are the Library Director.

APPLICANT INFORMATION						
Library/Library System						
Address	City		Zip Code			
Phone Number	UE					
Project Director - First Name	Project Director - Last Name	E-Mail Address				
PROJECT INFORMATION						
Project Title						
Project Abstract (a high overvie	w 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						
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Economic & Employment	Development					
Human Services						
Civic Engagement						
3 3						
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.)					
Bushed Foolbodies as a second					
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					

Services / Contractual			Budget Amount
Supplies/Materials/Small Eq	juipment (Items under \$5,	000 a piece)	Budget Amount
-			Durdwet America
Equipment (Items over \$10,000	J a piece)		Budget Amount
			DDG ISST DUDGET FUNDING
PROJECT BUDGE			PROJECT BUDGET FUNDING
Consultant Fees		LSTA	A Funds Requested
Services / Contractu Supplies/Materials/Small Equipme			
Equipme			
Total Project Co	st		
CEDTIFICATION CURCEA	NUMBER I - CC-4 41 1 - 4	C 1	1 - 11 1' 64 - 44 - ' 6 11 11 ' - '
true, complete, and accurate. I ar	m aware that the provision	of false, fictitiou	lge and belief that the information provided herein is us, or fraudulent information, or the omission of any
material fact, may subject me to Code Title 18, Sections 2, 1001,			nces including, but not limited to violations of U.S. 1 3801-3812.
Signature of Library System Director			
	Date		

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.

FAIN: LS-259183-OLS-25 FAD: 4/21/2025 Funds Provided by: Institute of Museums and Library Services