

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

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Phone Number

UEI

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Project Director - First Name

Project Director - Last Name

E-Mail Address

### PROJECT INFORMATION

**Project Title**

**Project Abstract** (a high overview of the project)

**Intended Outcome** (choose **one** *Focal Area* and then **one** *Intent*) See [Key Terminology](#) on the web page for more information

**Lifelong Learning**

**Information Access**

**Institutional Capacity**

**Economic & Employment Development**

**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.)

**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 Equipment** (Items under \$9,999.99 a piece)

**Budget Amount**

**Equipment** (Items over \$10,000 a piece)

**Budget Amount**

**PROJECT BUDGET SUMMARY**

Consultant Fees

Services / Contractual

Supplies/Materials/Small Equipment

Equipment

**Total Project Cost**

**PROJECT BUDGET FUNDING**

**LSTA Funds Requested**

**CERTIFICATION - SUBGRANTEE:** I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.

\_\_\_\_\_  
Signature of Library System Director

\_\_\_\_\_  
Date

Please print, sign, date, scan, and email the application as an email attachment in .pdf format to: [grantsprog@mlc.lib.ms.us](mailto:grantsprog@mlc.lib.ms.us).