

Mississippi Library Commission  
LSTA Subgrant Program  
FINAL EVALUATION

**APPLICANT INFORMATION**

Subgrantee:

Project Director:

Phone Number:

Email:

**PROJECT INFORMATION**

Project Number:

Program Fiscal Year:

Project Title:

Subgrant Start Date:

Subgrant End Date:

**Abstract:**

**Primary Project Intent:**

**Lifelong Learning**

**Information Access**

**Institutional Capacity**

**Economic & Employment Development**

**Human Services**

**Civic Engagement**

Select 1 to 2 subjects of the Intent you selected above.

**Arts, Culture, Humanities**

**History**

**Business & Finance**

**Languages**

**Employment**

**Science, Technology,  
Engineering & Math  
(STEM)**

**Personal Finance**

**Small Business**

**Civic Affairs**

**Library Infrastructure & Capacity**

**Community Concerns**

**Broadband Adoption**

**Government**

**Building & Facilities**

**Education**

**Certification**

**After-school Activities**

**Collection Development &  
Management**

**Curriculum Support**

**Continuing Education & Staff  
Development**

**Environment**

**Disaster Preparedness**

**General (select for  
electronic databases or  
other data sources)**

**Library Skills**

**Programming & Event Planning**

**Health & Wellness**

**Research & Statistics**

**Parenting & Family skills**

**Outreach & Partnership**

**Personal/Family Health and**

**Systems & Technology**

**Wellness**

**Other**

## **PROJECT OUTCOMES**

List the important findings or outcomes from this project.

Briefly describe the importance of these findings.

**How did you determine the outcomes? (Check all that apply)**

Survey

Observation

Other

Review of Administrative Data

Interview/Focus Group

**Based on outputs, outcomes, and/or other results, explain any significant lessons learned from these findings**

**Do you anticipate continuing this project after the grant period closes?**

Yes

No

**If yes, do you anticipate any change in level of effort and/or scope of the project?**

Yes

No

**If yes, do you anticipate any other changes in the project?**

Yes

No

**PROJECT BUDGET INFORMATION**

**Consultant Fees**

| <b>Budgeted Amount</b> | <b>LSTA Funds</b> | <b>Local Funds</b> | <b>Total</b> |
|------------------------|-------------------|--------------------|--------------|
| <b>Description</b>     |                   |                    |              |

**Services / Contractual**

| <b>Budgeted Amount</b> | <b>LSTA Funds</b> | <b>Local Funds</b> | <b>Total</b> |
|------------------------|-------------------|--------------------|--------------|
| <b>Description</b>     |                   |                    |              |

**Supplies, Materials, & Small Equipment (less than \$5000)**

| <b>Budgeted Amount</b> | <b>LSTA Funds</b> | <b>Local Funds</b> | <b>Total</b> |
|------------------------|-------------------|--------------------|--------------|
| <b>Description</b>     |                   |                    |              |

**Equipment (more than \$5000)**

| <b>Budgeted Amount</b> | <b>LSTA Funds</b> | <b>Local Funds</b> | <b>Total</b> |
|------------------------|-------------------|--------------------|--------------|
| <b>Description</b>     |                   |                    |              |

|                              |                   |                    |                    |
|------------------------------|-------------------|--------------------|--------------------|
| <b>Total Project Funding</b> | <b>LSTA Funds</b> | <b>Local Funds</b> | <b>Total Funds</b> |
|------------------------------|-------------------|--------------------|--------------------|

## PROJECT ACTIVITY REPORTING

**Title for this activity:**

**Provide a brief description of this activity**

**How did you deliver this activity?**

- In-person
- Virtual
- Combination in-person and virtual

**Partners in this project (select all that apply):**

- |                    |                                    |
|--------------------|------------------------------------|
| Federal Government | Non-Profit                         |
| State Government   | Private Sector                     |
| Local Government   | Tribe/Native Hawaiian Organization |
| School District    |                                    |

**Beneficiaries (select all that apply):**

- General Population
- Targeted Group
- All Ages
- 0-5 years
- 6-12 years
- 13-17 years
- 18-25 years
- 26-49 years
- 50-59 years
- 60-69 years
- 70+ years
- Urban          Suburban          Rural
- Intergenerational Groups
- Families
- Immigrants/Refugees
- Low Income
- Unemployed
- People with disabilities
- Library staff, volunteers, and/or trustees
- People with limited functional literacy or informational skills
- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian/Pacific Islander
- Not Applicable

**Identify the area(s) where your partner organization(s) operates**

- Libraries
- Historical Societies or Organizations
- Museums
- Archives
- Cultural Heritage Organization Multi-type
- Preschool
- Schools
- Adult Education
- Human Services Organizations
- Other

| Number of libraries, organizations where the activity took place. |
|---|
| Public Libraries  |
| Academic Libraries  |
| State Library   |
| Consortia   |
| Special Libraries   |
| School Libraries  |
| Other   |

## Choose Only 1

### Instruction - Program

|  |
|--|
| Number of times the program was administered |
| Number of sessions in the program            |
| Average session length (in minutes)          |
| Average number of attendance per session     |

### Instruction - Presentation

|   |
|---|
| Number of presentations/performances administered   |
| Average presentations/performances length (minutes) |
| Average number in attendance per session            |

### Content - Acquisition

|  |
|--|
| Number of hardware acquired  |
| Number of software acquired  |
| Number of licensed databases acquired  |
| Number of print materials acquired   |
| Number of electronic materials acquired  |
| Number of audio/visual units (audio discs, talking books, other recordings) acquired |

### Content - Creation

|   |
|---|
| Number of items digitized                             |
| Number of items digitized and available to the public |
| Number of physical items                              |
| Number of open-source applications/software systems   |
| Number of proprietary applications/software systems   |
| Number of learning resources (e.g. toolkits, guides)  |

### Content - Preservation

|   |
|---|
| Number of items conserved, relocated to protective storage, rehoused, or for which other preservation-appropriate physical action was taken |
| Number of items reformatted, migrated, or for which other digital preservation-appropriate action was taken                                 |
| Number of preservation plans/frame works produced and/or updated (e.g. preservation readiness plans, data management plans)                 |

### Procurement (only for Institutional Capacity Intent)

|  |
|--|
| Number of equipment acquired           |
| Number of acquired equipment used      |
| Number of hardware items acquired      |
| Number of acquired hardware items used |
| Number of software items acquired      |
| Number of acquired software items used |
| Number of materials/supplies acquired  |

## REPORT CERTIFICATION AND SIGNATURE

I CERTIFY, TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION GIVEN IN THIS REPORT IS TRUE AND CORRECT AND IS PROVIDED IN ACCORDANCE WITH THE *LSTA MANUAL* AND ANY OTHER AGREEMENTS ENTERED INTO RELATING TO THIS PROJECT.

\_\_\_\_\_  
Project Director, Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Email Address

### Email

To: grantsprog@mlc.lib.ms.us  
Attach report as .pdf file  
Subject: **LSTA Final Evaluation**