



* GRANT * APPLICATION *

BASIC INFORMATION

Element 1

APPLICANT INFORMATION

Grantee Name		
Mailing Address		
City		State
Zip Code	County	
Grantee's Website		
Library Type	Congressional District(s)	
Special/Other Library Type		
TIN	Vendor Number	
Project Coordinator		
Title		
Phone Number	Fax Number	
E-Mail Address		
	tifies that, as the duly authorized representative of the applicant, I hereby certify that the applicant will comply.	
Signature		Date
Director's Name		
Mailing Address		
City	State	Zip Code

PROJECT INFORMATION

Project Title		
Grant Period	Grant Period To	

Federal Library Services & Technology Act (LSTA) Purpose

Pennsylvania's FY 2014/15 LSTA Goals

Facilitate statewide expansion of electronic and physical linkages to improve resource delivery

Create opportunities for libraries to enhance their capacity to provide 21st Century resources, services and programs to their communities

Preserve unique collections and prepare libraries for disaster recovery

Primary Project Intent

ACCESS TO INFORMATION - Improve users' ability to discover information or obtain information resources

CIVIC ENGAGEMENT – Improve users' ability to engage in their communities or participate in community conversations around topics of concern

EMPLOYMENT & BUSINESS DEVELOPMENT – Improve users' ability to apply information that furthers the status of their jobs and/or businesses

HUMAN SERVICES – Improve users' ability to apply information that furthers their personal, family or household circumstances, including household finances, health and wellness, or parenting and family skills

INSTITUTIONAL CAPACITY – Add, improve or update a library function or operation in order to enhance its effectiveness. This includes enhancement and education of the library workforce

LIFELONG LEARNING – Improve users' knowledge or abilities beyond basic access to information. This includes formal education of participants or improvement of general knowledge and skills

Target Audience for Project

Community Description	Urban	Suburban	Rural	Statewide
Ages	All Ages		Situation	Ethnic or racial minority populations
	Preschool			Families
	Children			Immigrants/refugees
	Teens &/or Young Adults			Intergenerational groups (excluding families)
	Adults			Library staff, volunteers and/or trustees
	Senior Citizens			Low income
				People with disabilities
				People with limited functional literacy or informational skills
				Unemployed

PROJECT BACKGROUND AND SUMMARY

Element 2

Describe how this project was identified as a need, how it relates to your strategic plan, and what will be accomplished if this project is
implemented. This section should relate to activities in the timeline (Element 5) and include statistical information to support the project.
Limit to one page.

PLANNING AND EVALUATION

Element 3

Please answer each area concisely and completely. Limit to two pages.						
Project Purpose – Short statement which answers the questions: we do what, for whom, for what expected benefit. (500 Character Max)						
Project Activities/Methods – How will the project be carried out? Include major activities from the timeline						

Anticipated Project Outputs – Measures of service or products provided (500 Character Max)				
Anticipated Project Outcome(s) – what change is expected in the target audiences skills, knowledge, behavior, attitude, and status or				
life condition? How will you measure these outcomes? (500 Character Max)				
Complete the following sentence. This project will be successful if: (500 Character Max)				

GRANT TIMELINE/ACTIVITIES

Element 4

Show each major project activity and when it will be started and/or completed throughout the project. The timeline should correspond to the activities described in Planning and Evaluation. Please put an **X** in each pertaining month.

	2015						
Jan	Feb	March	April	May	June	July	August
	Jan	Jan Feb	Jan Feb March	Jan Feb March April	Jan Feb March April May	Jan Feb March April May June	Jan Feb March April May June July

BUDGET & FUNDING

Element 5

The budget should clearly identify the amounts requested and from what sources.

Column A	Column B	Column C	Column D	Column E
Budget Category	LSTA	Cash Match	In-Kind	Total (B+C+D = E)
Salaries/Wages/Benefits				
Ü				
Subtotal Explanation:				
Explanation.				
Consulting Fees				
Ü				
Subtotal				
Explanation:				
Tuoval				
Travel				
Subtotal				
Explanation:				

LSTA Grant Application

Budget Category	LSTA	Cash Match	In-Kind	Total
Supplies/Materials				
Subtotal				
Explanation:				
Equipment (Items over \$5,000 per unit)				
Subtotal				
Explanation:				
Services				
Subtotal				
Explanation:	•			
Project Subtotal				
Indirect Cost (cannot exceed 4%)				
Grant Totals				

BUDGET & FUNDING

Element 5

LSTA Funds Requested		
Cash Match		
In-Kind		
Total Project Cost		

Future Funding

Briefly describe how this project will be financially supported in the future.

ATTACHMENTS Element 6

If you have additional resources that support your grant, please attach after this page



INTERNET CERTIFICATION FOR APPLICANT PUBLIC LIBRARIES Element 7

As the duly authorized representative of the applicant library, I hereby certify that the library is (select one)

CIPA Compliant (The applicant library has complied with the requirements of 20 U.S.C. § 9134(f)(1) et seq.

The CIPA requirements do not apply because no funds made available under the LSTA program are being used to purchase computers to access the Internet, or to pay for direct costs associated with accessing the Internet.

Signature of Authorized Representative	
Authorized Representative Name	Date

Name of Applicant Library/Program