# State Library of North Carolina Continuing Education Scholarship Grant Application

Applicant: The eligible library applying for the grant award.

Participant: Individual(s) receiving the educational content. The participant must be an employee of the applicant library.

Authorizing Official: The person at the institution that is able to accept federal grant funds on the institutions behalf. This person is generally a county or city manager, governing board chair, dean, or CFO. In most cases the library director is NOT the authorizing official.

LSTA Library Services and Technology Act: The federal program through which the State Library of NC (SLNC) receives funding for the Continuing Education Scholarship Grants. LSTA is a program of the Institute of Museum and Library Services (IMLS).

*IMLS*: Institute of Museum and Library Services. The federal agency that awards LSTA funds to SLNC for administering in the State of North Carolina.

#### **Contact Information**

Name of Applicant Library:	
Library Mailing Address:	
Participant Name:	Participant Position Title:
Participant Email:	Participant Phone:
Library Director Name:	
Library Director Email:	
Authorizing Official Name:	
Authorizing Official Email:	

## **Grant Application and Requirements**

Please	verify that you have completed the following:		
	I have reviewed the Continuing Education Grant Guide found on the SLNC website and understand the grant requirements and process details.		
	I have discussed this Continuing Education event with SLNC's Continuing Education Consultant, as needed.		
	I have discussed this application with my library director and he/she approves of my application for these grants funds.		
Grant	t Details		
1.	Name of Continuing Education Event:		
2.	Provide a Brief Description of the Continuing Education Event:		
3.	URL for the website or details:		
4.	Are you presenting at the Continuing Education Event: Yes No		
5.	Based on preliminary information available about the event at this time, please list 3- 4 sessions you plan to attend based on your library's needs.:		
6.	State event is occuring:		
7.	Event start date:		
8	Event end date:		

#### **Budget**

In this section you will provide information regarding your estimated expenses to participate in the event outlined above. The budget table provided below lists allowable grant cost categories. Maximum grant award is \$1,000 for in-state conferences and \$2,500 for out-of-state conferences. There is a no match requirement.

Costs will be reviewed by the SLNC to determine if they are allowable, reasonable, and necessary. Care should be taken to plan for the most efficient and economical method of travel. If no expenses are estimated for a category, please enter 0.00

	Estimated Amount	Source for Estimate/Explanation
Conference Registration fee	\$	
Lodging	\$	
Airfare	\$	
Airfare baggage fee	\$	
Airport-transportation fees	\$	
Rental car/fuel charges	\$	
Mileage	\$	

Total of Estimated Allowable Expenses: \$ Grant Request Amount: \$

### Impact Statement

Library Services and Technology Act (LSTA) funds are federal funds awarded to the State Library of North Carolina annually by the Institute of Museum and Library Services (IMLS). The funds are governed by the purposes and priorities set forth by the US Congress, in conjunction with the Office of Management and Budget's (OMB) Uniform Grant Guidance, for allowable uses of federal funds. The State Library of North Carolina Continuing Education Scholarship Grants utilize LSTA funds and must address one of the LSTA Priorities in order to be eligible for these grant funds.

1. Describe the knowledge, skills, or information the participant anticipates gaining as a result of attending this conference.

2. Continuing Education Scholarship Grants funded by LSTA are meant to ultimately benefit the library's end users. What target audience/s will the participant be focusing on while attending the conference and how will that target audience benefit from participant's newly acquired knowledge and/or skills?

## **Application Certification and Signatures**

If awarded this CE Grant, do you agree to complete follow-up evaluations for State Library of North Carolina reporting on the impact of your experience? The first evaluation is with the initial funding reimbursement request, and a second is requested approximately 6 months after the conference.

You are electronically signing this application application is true and accurate to the best of	n and certifying that all the information provided on this f your knowledge.
A copy of the application will be emailed to the	ne participant and the library director listed above.
Participant Signature	Date Signed
Participant Name	-
Library Director Signature	 Date Signed
Library Director Name	-