**Section A: Organization information**

District/System name Click to enter text Branch, if applicable Click to enter text

Mailing address Click to enter text

Statewide Vendor number\* Click to enter text

DUNS number\* Click to enter text

Tax ID number Click to enter text

**Contracting authority**

Name Click to enter text Title Click to enter text

Email Click to enter text Telephone Click to enter text

I affirm that the information included in this application is true. If this application is funded, we will sign a funding agreement and complete the activities in this application by Friday, April 6, 2017. I am authorized by the applicant organization’s governing body to obligate it to financial liabilities. We agree to participate in information gathering as a part of a state-administered evaluation of the project, using a template provided by the Washington State Library.

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Signature Date

**Fiscal Agent**

Name Click to enter text Title Click to enter text

Email Click to enter text Telephone Click to enter text

**As the Fiscal Agent,** I am accountable for the integrity of the official accounting system and the financial statements that system provides. I declare that the necessary fiscal policies and procedures exist to assure compliance with state and local laws, rules and regulations, and conformance with generally accepted audit standards.

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Signature Date

## **\* Office of Financial Management** (OFM) requirement ― Grantees must now register with the State of Washington as a “statewide vendor**”** and provide a DUNS Number.If you do not have these numbers, you will be provided with the necessary information and forms to obtain them if awarded a grant.

In this grant opportunity you will have the option to apply for equipment supplied by the State Library or funding (or both) to support the following at your library:

**Section A: Organization information (cont’d)**

**Library Director (if not same as Contracting Authority above)**

Name Click to enter text Title Click to enter text

Email Click to enter text Telephone Click to enter text

**Project Manager**

Name Click to enter text Title Click to enter text

Email Click to enter text Telephone Click to enter text

We affirm that the information included in this application is true. If this application is funded, we will sign a funding agreement and complete the activities in this application by Wednesday, May 31, 2017. We agree to participate in information gathering as a part of a state-administered evaluation of the project.

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Signature Date

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Signature Date

* Computer instruction
* Coding programming
* Microsoft Office Specialist (MOS) certification

Grant requests should include equipment purchased by the State Library and/or funds to purchase equipment accessories, supporting materials, and promotional activities. You may request support for either coding programming or Microsoft certification testing, or both. The grant application is divided into 3 parts:

Section 1: Equipment Request (template provided)

Section 2: Narrative Questions

Section 3: Work Plan (template provided)

Section 4: Budget (template provided)

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Section 1: Equipment Request** | | |  |  |  |  | | **Description** | **Quantity Requested** | **Please explain why you've requested this quantity.** | | | | | | **Laptop with mouse & case** |  |  | | | | | | **Tablet Computer** |  |  | | | | | | **Wireless Router** |  |  | | | | | | **Earlier grant** If you received a grant for Microsoft Imagine Academy activities from WSL prior to this, please include the following information: | | | | | | | | **Equipment/ Funding** | **Date** | **Additional information re this request** | | | | | |  |  |  | | | | | |

Note: There is no limit on the quantity of equipment that may be granted; please request what you feel will lead to the best outcome for your Library and program/grant objectives. The State Library reserves the right to offer partial awards if requests exceed the equipment available. Ad rows as needed. Only the narrative part of this question (top) is scored, for a possible 20 points.

**Section 2: Narrative Questions**

1. Please describe your library’s current computer instruction/programming activities, including with the Microsoft Imagine Academy, Microsoft certification and coding programming. *This answer is not scored*; please do not exceed 400 words. If applicable, also include:

• target audience(s)

• program length and frequency

• topics covered (computer basics, Microsoft Office, social media, etc)

• how classes/programs are promoted

• successes and shortcomings

2. How will grant resources allow you to increase or enhance your library’s computer instruction/ programming activities, including Microsoft certification and coding programming? *This answer is worth 30 points*.

Please include:

• New or expanded target audience(s)

• program length and frequency

• desired successes (how many people will be affected and how)

• potential difficulties or barriers, and how they might be addressed

***Section 3: Work Plan***

*Please use the Work Plan template to describe (in chronological order) your proposed grant activities, expanding and adding rows as needed. If applicable, your work plan should include the following:*

* *Purchasing of grant-funded items/activities*
* *Program recruitment, promotion, outreach to community partners*
* *Programming (certification “test fests”, coding programs/camps, etc), including session length & frequency*

*Note: You can expect to receive your granted equipment within 1-3 weeks of contract execution*

*Add rows if needed. This answer is worth 30 points.*

|  |  |  |  |
| --- | --- | --- | --- |
| *Anticipated dates* | | *Activity* | *Description* |
| *Start* | *End* |
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| ***Part 4: Budget for expendable materials & supplies*** | | | | |
| *Expendable materials and supplies may include: software, equipment cases, supplemental hardware (keyboards, headphones, etc.), books for the library’s circulating collection, and promotional items and activities. Furniture required to comply with Certiport Authorized Testing Center (CATC) requirements is also eligible for grant funding. Add rows if needed.*  ***Total request cannot exceed $3000.*** | | | | |
| ***Description*** | ***Quantity Requested*** | ***Unit Cost*** | ***Ext. Cost*** | ***Please explain each item and how they will be used to accomplish program goals.*** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| *Total Expendable Materials & Supplies:*  *(Cannot exceed $3000)* | | | ***$0.00*** |  |
| *Please round to the nearest whole dollar amount. Expand and add rows as needed, or attach an explanation on a separate sheet, if necessary.* | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| ***Please note, grant funds may not be used for:*** | |  |  |
| *Food and other refreshments* | *Advertising and promotion of libraries in general* | | |
| *Contracts with others* | *Conference registration or conference travel* | | |
| *Staff salary or benefits* |  |  |  |