

# FY2018 APPLICATION FOR STATE AID GRANT

The Library of Virginia • Library Development and Networking Division • 800 East Broad Street • Richmond, VA 23219-8000

The Code of Virginia 42.1-50 states, "applications must be received prior to June 1st of each calendar year." Code of Virginia 42.1, 46-58, the Virginia Administrative Code 17 VAC 15-110-10 (also known as the Requirements Which Must Be Met In Order to Receive Grants-In-Aid), and the Instructions for the Expenditure of State Aid Grants must be followed.)

Library Director (Please Print): \_\_\_\_\_  
Library Director's E-mail Address: \_\_\_\_\_  
Library System's URL: \_\_\_\_\_  
Official Name of Library System: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number: (        ) \_\_\_\_\_ Fax Number: (        ) \_\_\_\_\_

Library is open \_\_\_\_\_ hours per week.  
Number of evenings with 3 or more consecutive hours after 5:00 PM \_\_\_\_\_  
Total hours after 5:00 PM per week \_\_\_\_\_  
Number of weekend hours per week \_\_\_\_\_  
(Requirement #5)

Five Year Plan (Requirement #2)  
\_\_\_\_\_ Date of Plan  
\_\_\_\_\_ Date of last annual revision  
\_\_\_\_\_ Revision Expected

Type and frequency of delivery system  
(Requirement #8)  
\_\_\_\_\_  
\_\_\_\_\_

Type of extension service provided (Requirement #7)  
\_\_\_\_\_ Bookmobile/Van  
\_\_\_\_\_ Contact Hours  
\_\_\_\_\_ Branch(es)  
\_\_\_\_\_ Books-By-Mail  
\_\_\_\_\_ Contract with other library  
\_\_\_\_\_ Other (specify) \_\_\_\_\_

I affirm that I am **certified** by The Library Board.  
\_\_\_\_\_  
Librarian's Signature \_\_\_\_\_ Date  
Certificate Number: \_\_\_\_\_

I notify The Library Board that I am **not certified**.  
\_\_\_\_\_  
Librarian's Signature \_\_\_\_\_ Date

I agree, in order to administer this grant, to participate in any administrative seminars required by the Library Development and Networking Division.  
\_\_\_\_\_  
Librarian's Signature \_\_\_\_\_ Date

\_\_\_\_\_  
Signature of Chairperson of the Board of Trustees \_\_\_\_\_ Date  
or Authorized Representative of the Governing Body

**APPROVED BY LVA** **DO NOT WRITE IN THIS SPACE**  
\_\_\_\_\_  
Director, Library Development and Networking Division  
\_\_\_\_\_  
Librarian of Virginia  
Date: \_\_\_\_\_ Amount: \_\_\_\_\_

The library system was established in (year) \_\_\_\_\_ and is organized under the Code of Virginia (check all that apply):

- Section 42.1-33:     City    County    Town
- Section 42.1-37:     Regional
- Other (specify): \_\_\_\_\_
- Section 42.1-34     Section 42.1-43

Governing Body is: \_\_\_\_\_  
(see Code of Virginia, Section 42.1-35 and 36)

The Board of Trustees is (check one) — (see Code of Virginia, Section 42.1-35 and 36):  Governing    Advisory

The Board of Trustees has \_\_\_\_\_ members:  
 Appointed     Elected

Librarian is appointed by:  Brd. of Trustees    City/Town Mgr.  
 County Manager    Other (specify): \_\_\_\_\_

The Board meets:  Monthly    Quarterly  
 Other: \_\_\_\_\_

The Board meets: Day \_\_\_\_\_  
Time: \_\_\_\_\_

Give the complete name, title, address, and telephone number of the person to whom the librarian directly reports:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: (        ) \_\_\_\_\_

Give the complete name, title, address, and telephone number of the person who handles all library funds (i.e., the treasurer or fiscal officer who signs the checks):

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: (        ) \_\_\_\_\_

Funds are handled by:  
 Library Board                       Local Government

Give the complete name, title, and address of the local governing officials (i.e., Chairperson of Board of Supervisors, County Manager/Administrator, City Manager, Town Manager, etc.) in each jurisdiction (city, county, town).

1. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_

2. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_

3. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_

4. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_

5. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_

6. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_

7. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_

8. Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone No.: (        ) \_\_\_\_\_