

FY2019 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.) Please submit two (2) copies with original signatures.

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.: () _____