

# PPO LTC: Accessible Small and Rural Communities Round 3

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*American Library Association*

## *I. Instructions*

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### Choices

\$10,000 grant ONLY

\$20,000 grant ONLY

\$20,000 OR \$10,000

## II. Project Director Information

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Note: The project director is the person who will be responsible for coordinating all elements of the LTC grant on behalf of the library. All fields are required unless noted otherwise.

### Project Director First Name\*

*Character Limit: 25*

### Project Director Last Name\*

*Character Limit: 25*

### Project Director Pronouns

*Character Limit: 250*

### Project Director E-mail\*

*Character Limit: 254*

### Project Director Phone Number\*

(10 digits, xxx-xxx-xxxx)

*Character Limit: 15*

### Extension

*Character Limit: 5*

### Project Director Title\*

*Character Limit: 250*

### Department

*Character Limit: 250*

## III. The Library

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Please answer the following questions about your library.

### Institution Name\*

*Character Limit: 250*

## Number of Branches in Your Library System (if applicable)

*Character Limit: 250*

## Library Branch Name (if applicable)

*Character Limit: 250*

## Address 1 \*

*Character Limit: 250*

## Address 2

*Character Limit: 250*

## City\*

*Character Limit: 250*

## State/Territory\*

Find your state/territory abbreviation.

### Choices

AK  
AL  
AR  
AS  
AZ  
CA  
CO  
CT  
DC  
DE  
FL  
GA  
GU  
HI  
IA  
ID  
IL  
IN  
KS  
KY  
LA  
MA  
MD  
ME  
MI  
MN  
MO  
MP  
MS



## Library Website URL (if applicable)

*Character Limit: 250*

## Community Type\*

Select the option that, in your opinion, best describes your community. Note that these are not precise definitions; we simply want a sense of your community.

### Choices

Rural

Suburb/Rural

## Population Size of Your Community\*

Select the population size for the municipality (city/town) that your library is located in.

### Choices

<4,999

5,000 – 9,999

10,000 – 24,999

## How did you learn about this opportunity?\*

### Choices

ALA Annual Conference

ALA Connect

ALA.org

ProgrammingLibrarian.org

Association for Rural & Small Libraries (ARSL)

ARSL Conference

Received an email

Social media

Word of mouth

Other (specifof mouth



that reviewers can gain an understanding of your prior LTC work. Please also specify whether the funding you are seeking is for expanding on your previous LTC: Access work or for a new project. Failure to provide this information may result in your proposal being deemed uncompetitive.

Before you compose the narrative part of this application, we strongly recommend that you read the [grant guidelines](#) carefully. All sections below are required, unless specified otherwise. Please ensure that you fully answer all the questions listed above each narrative field. If you do not, your application is unlikely to be competitive.

This section contains four required narrative questions. Note that your response for each question is limited to 3,000 characters (including spaces and punctuation). Please respond to all elements of each question.

### Community and Library Information (I)\*

Describe your library and the community it serves, including demographics, dynamics, and key issues or challenges it faces related to community members with disabilities.

*Reminder: Reviewers do not have any details about your answer to this question from your previous proposal.*

*Character Limit: 3000*

### Primary Audience (I)

Describe what part(s) of the disabled community will be the primary audience for your project. Why did you choose to focus on this audience? How, if at all, do you currently serve this audience? What are your plans for outreach efforts to engage this audience throughout the project? What are your overarching goals for engaging this audience with your project?

Please note that while many people of an older age have disabilities, **age itself is not a disability**. For a definition of disability or examples of what is considered a disability, please visit the project [FAQ page](#).

*Reminder: Reviewers do not have any details about your answer to this question from your previous proposal.*

*Character Limit: 3000*

### Rationale (I)\*

What challenge or opportunity does your project seek to address for the primary audience? How was it identified? Describe how you used relevant information from reliable sources to define the need, challenge, or opportunity you seek to address.

*Reminder: Reviewers do not have any details about your answer to this question from your previous proposal.*

*Character Limit: 3000*

### **Project Plan (I)\***

Describe your preliminary plan for addressing the challenge or opportunity identified. What activities will you carry out to execute the plan? How has the input of the primary audience influenced this plan? How will the perspectives and input of the primary audience continue to be incorporated throughout the project? How will you share information about the project and its outcomes? Do you have any community partners in mind (existing or new) that you plan to engage in the process?

#### ***IMPORTANT NOTES***

*All selected sites will be required to facilitate at least one community conversation with the identified primary audience to discuss accessibility in the community and library in order to collaboratively identify existing resources, needs/gaps, and priorities. Sites will be expected to revise or affirm their preliminary plans based on the outcomes of the conversation.*

*Reminder: Reviewers do not have any details about your answer to this question from your previous proposal. You should discuss how your plan either expands upon the work of your first award or is different from your first project.*

*Character Limit: 3000*

### **LTC Access History (continued)\***

Please select the total amount of funding your library has received from LTC: Access to date.

#### **Choices**

\$10,000  
\$20,000  
\$30,000  
\$40,000

### ***\$10,000 Budget ONLY***

#### **Budget Plan (\$10,000 ONLY)\***

Describe your plans for the grant funds. What will you use the funding to purchase or support? Please be specific (e.g. \$5,000 will be spent on staff time to support the development and implementation of the project, \$3,000 will be used to purchase and install an automatic door opener, \$1,000 will be used as incentives for conversation participants). The total amount of this section should add up to \$10,000.

Format budget similar to the following:

- \$XXX for Item(s) 1
- \$XXX for Item(s) 2
- \$XXX for Item(s) 3



[Download Example Budget for LTC ACCESS Applicants](#)

*Character Limit: 1000*

## *\$20,000 Budget ONLY*

### **Budget Plan (\$20,000 ONLY)\***

Describe your plans for the grant funds. What will you use the funding to purchase or support? Please be specific (e.g. \$10,000 will be spent on staff time to support the development and implementation of the project, \$6,000 will be used to purchase and install an automatic door opener, \$2,000 will be used as incentives for conversation participants). The total amount of this section should add up to \$20,000.

Format budget similar to the following:

- \$XXX for Item(s) 1
- \$XXX for Item(s) 2
- \$XXX for Item(s) 3

[Download Example Budgets for LTC ACCESS Applicants](#)

*Character Limit: 1000*

## *\$20,000 Budget OR \$10,000 Budget*

Below, please describe your budget plans for an award of \$20,000. If you are not selected for the \$20,000 award, you will then be considered for the \$10,000 award. Where indicated, describe how your plans would adjust or change if you are awarded \$10,000.

### **Budget Plan (\$10,000 or \$20,000) - \$20,000\***

Describe your plans for the grant funds at the \$20,000 level.

What will you use the funding to purchase or support? Please be specific (e.g. \$10,000 will be spent on staff time to support the development and implementation of the project, \$6,000 will be used to purchase and install an automatic door opener, \$2,000 will be used as incentives for conversation participants). **The total amount of this section should add up to \$20,000.**

Format budget similar to the following:

- \$XXX for Item(s) 1

Application



## Certification\*

By checking this box and submitting this application, the authorized representative for the applicant organization certifies that all statements contained herein are true and correct to the best of their knowledge and belief, and that the applicant organization (including, when pertinent, each additional library branch on whose behalf it is applying) is neither presently debarred, suspended, proposed for debarment, declared ineligible, nor voluntarily excluded from participation in this transaction by any federal department or agency.

NOTE: You can check the status of your institution with regard to debarment at the website of the System for Award Management (SAM.gov).

### Choices

I agree

## Certification Date (today's date)\*

*Character Limit: 10*

## *VIII. Review and Submit*

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Please review your application to ensure a complete submission. Once you have completed your review, click "Submit" in the bottom right corner of your screen.

You cannot make changes to your application once it has been submitted. Late or incomplete applications and applications from reviewers whose institutions are applying for the corresponding grant opportunity will not be reviewed.

**Ensure you receive messages regarding your application! Emails regarding your application status will come from [administrator@grantinterface.com](mailto:administrator@grantinterface.com). Please save this email address as a contact to prevent notification emails from being marked as spam.**