## **LIBRARY SERVICES AND TECHNOLOGY ACT**

## **GRANT**

## **FINAL STATUS REPORT**

**For Federal Fiscal Year 2016-17 Projects**

**Due: November 1, 2017**

Library/Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grant Award $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I certify that all of the information contained in the following expenditure report, equipment inventory and project narrative is correct to the best of my knowledge.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Library Director Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Typed Name of Library Director

**Library/Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grant Award $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Expenditure Report**

Use the narrative sections to describe expenditure of the funds. Add additional expenditure lines/narrative space as needed.

|  |  |  |  |
| --- | --- | --- | --- |
| **A. Salaries and Benefits**  All salaries paid from federal or local sources | | **LSTA** | **Local/State Match** |
| **Position Title** | **FTE** |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Salaries** |  |  |  |
| **Salaries and Benefits Narrative:** | | | |

|  |  |  |
| --- | --- | --- |
| **B. Contractual Services** | **LSTA** | **Local/State Match** |
| **Specify** |  |  |
|  |  |  |
|  |  |  |
| **Total Contractual Services** |  |  |
| **Contractual Services Narrative:** | | |

|  |  |  |
| --- | --- | --- |
| **C. Library Materials** | **LSTA** | **Local/State Match** |
| **Specify** |  |  |
|  |  |  |
|  |  |  |
| **Total Library Materials** |  |  |
| **Library Materials Narrative:** | | |

|  |  |  |
| --- | --- | --- |
| **D. Supplies** | **LSTA** | **Local/State Match** |
| **Specify** |  |  |
|  |  |  |
|  |  |  |
| **Total Supplies** |  |  |
| **Supplies Narrative:** | | |

|  |  |  |
| --- | --- | --- |
| **E. Travel** | **LSTA** | **Local/State Match** |
| **Specify** |  |  |
|  |  |  |
|  |  |  |
| **Total Travel** |  |  |
| **Travel Narrative:** | | |
| **F. Equipment** | **LSTA** | **Local/State Match** |
| **Specify** |  |  |
|  |  |  |
|  |  |  |
| **Total Equipment** |  |  |
| **Equipment Narrative:** | | |

|  |  |  |
| --- | --- | --- |
| **G. Other** | **LSTA** | **Local/State Match** |
| **Specify** |  |  |
|  |  |  |
|  |  |  |
| **Total Other** |  |  |
| **Other Narrative:** | | |

|  |  |  |
| --- | --- | --- |
|  | **LSTA** | **Local/State Match** |
| **Total A-G** |  |  |

**Submit funds listed below along with this report.**

**I. UNEXPENDED LSTA FUNDS TO BE REFUNDED $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**J. TOTAL INTEREST EARNED DURING THE PROJECT $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Library/Organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Project ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**II. EQUIPMENT INVENTORY**An inventory of equipment purchased as part of an LSTA-funded project must be maintained at the state and local level. Any changes in the status of the equipment (i.e., changes in location or use) must be reported to the Division. List each item purchased for the project during the project period using local funds, LSTA funds or a combination of funds. Each item should be listed separately. Include only equipment with an acquisition cost of more than $1,000 and a useful life of more than one year. | | | | | | | |
| Item/Description | Date  Received | Total Cost | Local $ Spent | LSTA $  Spent | Serial/  Model # | Local ID # | Location and Use |
|  |  |  |  |  |  |  |  |

Organization Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Project ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Project Narrative**

This information is reported by the Division to the Institute of Museum and Library Services (IMLS).

**1. Project Information**

Abstract (up to 1,000 characters). This is a brief description of the project’s purpose, activities and target beneficiaries, plus any **high-level** results that are appropriate to highlight. Ideally, it should stand on its own as a narrative summary of the project.

**2. Intent** (Select one.)

\_\_\_ Improve users’ formal education

\_\_\_ Improve users’ general knowledge and skills

\_\_\_ Improve users’ ability to discover information resources

\_\_\_ Improve users’ ability to obtain and/or use information resources

\_\_\_ Enhance library’s workforce

\_\_\_ Improve library’s physical and technological infrastructure

\_\_\_ Improve library’s operations

\_\_\_ Improve users’ ability to use resources and apply information for employment support

\_\_\_ Improve users’ ability to use and apply business resources

\_\_\_ Improve users’ ability to apply information that furthers their personal, family or household finances

\_\_\_ Improve users’ ability to apply information that furthers their personal or family health and wellness

\_\_\_ Improve users’ ability to apply information that furthers their parenting and family skills

\_\_\_ Improve users’ ability to participate in the community

\_\_\_ Improve users’ ability to participate in community conversations around topics of concern

**3. Subject(s)** (Select up to two.)

\_\_\_ Arts, Culture and Humanities

\_\_\_ Business and Finance

\_\_\_ Employment

\_\_\_ Personal Finance

\_\_\_ Small Business

\_\_\_ Civic Affairs

\_\_\_ Community Concerns

\_\_\_ Government

\_\_\_ Education

\_\_\_ After-School Activities

\_\_\_ Curriculum Support

\_\_\_ Environment

\_\_\_ General (Select only for electronic databases or other data sources.)

\_\_\_ Health and Wellness

\_\_\_ Parenting and Family Skills

\_\_\_ Personal/Family Health and Wellness

\_\_\_ History

\_\_\_ Languages

\_\_\_ Literacy

\_\_\_ Adult Literacy

\_\_\_ Digital Literacy

\_\_\_ Early Literacy

\_\_\_ Reading Program (Not Summer Reading)

\_\_\_ Summer Reading

\_\_\_ Science, Technology, Engineering and Math (STEM)

\_\_\_ Library Infrastructure and Capacity

\_\_\_ Broadband Adoption

\_\_\_ Buildings and Facilities

\_\_\_ Certification

\_\_\_ Collection Development and Management

\_\_\_ Continuing Education and Staff Development

\_\_\_ Disaster Preparedness

\_\_\_ Library Skills

\_\_\_ Programming and Event Planning

\_\_\_ Research and Statistics

\_\_\_ Outreach and Partnerships

\_\_\_ Systems and Technologies

\_\_\_ Other (Please specify.):

**4. Activity Information**

Add as many activities as needed to describe the project. Each of the activities reported must fall within the four (4) categories listed on the chart below (Instruction/Content/Planning & Evaluation/Procurement). Focus on the **major** activities undertaken by the grant project.

**4.1 Activity Title (up to 75 characters)**

**4.1.1 Activity Abstract (up to 1,000 characters)**

This is a brief description of the activity’s purpose, methods and target beneficiaries, plus any **high-level** results that are appropriate to highlight. It could stand on its own as a narrative summary of the activity. (NOTE: Any additional description of relevant outputs, outcomes and/or other results from your project should be entered in Section 8 – Project Outcomes.)

**4.1.2 Activity Type**

For each individual activity described, use the chart below to provide the activity type, the mode and the format. (See below for an example of how to use the chart.)

|  |  |  |
| --- | --- | --- |
| **Activity (Select one.)** | **Mode (Select one.)** | **Format (Select one.)** |
| 1. Instruction | 1. Program | 1. Virtual |
|  | 1. Presentation/Performance | 1. In-Person |
|  | 1. Consultation/Drop-In Referral | 1. Combined In-Person and Virtual |
|  | 1. Other: | 1. Other: |
|  |  |  |
| 1. Content | 1. Acquisition | 1. Digital |
|  | 1. Creation | 1. Physical |
|  | 1. Preservation | 1. Combined Digital and Physical |
|  | 1. Description |  |
|  | 1. Lending |  |
|  | 1. Other: |  |
|  |  |  |
| 1. Planning and Evaluation | 1. Prospective | 1. In-House |
|  | 1. Retrospective | 1. Third-Party |
|  |  |  |
| 1. Procurement | N/A | N/A |

**Activity Type Example**

First select one activity type (A-Instruction, B-Content, C-Planning and Evaluation, or D-Procurement).

If you selected main category A, then select Mode 1, 2, 3 or 4.

Within that sub-category, select Format a, b, c or d.

**A**. Activity = Instruction

**1**. Mode = Program

**a**. Format = Virtual

**b**. Format = In-person

**c**. Format = Combined in-person and virtual

**d**. Format = Other

**2**. Mode = Presentation/performance

**a**. Format = Virtual

**b**. Format = In-person

**c**. Format = Combined in-person and virtual

**d**. Format = Other

**3**. Mode = Consultation/Drop-in-Referral

**a**. Format = Virtual

**b**. Format = In-person

**c**. Format = Combined in-person and virtual

**d**. Format = Other

**4**. Mode = Other

**a**. Format = Virtual

**b**. Format = In-person

**c**. Format = Combined in-person and virtual

**d**. Format = Other

The highlighted items above would indicate an activity type where the activity undertaken was instruction in program mode and in virtual format (A.1.a.).

**4.1.3 Quantity Information**

As applicable, provide the following quantity information for each activity type.

If “Activity – Mode” combination = “Instruction – Program”:

* Session length (minutes):
* Number of sessions in program:
* Average attendance per session:
* Number of times program administered:

If “Activity – Mode” combination = “Instruction – Presentation/Performance”:

* Presentation/performance length (minutes):
* Number of presentations/performances administered:
* Average attendance per session:

If “Activity – Mode” combination = “Instruction – Consultation/Drop-In Referral”:

* Total number of consultation/reference transactions:
* Average number of consultation/reference transactions per month:

If “Activity – Mode” combination = “Content – Acquisition”:

* Number of hardware units acquired:
* Number of software units acquired:
* Number of licensed databases acquired:
* Number of print materials (books and government documents) acquired:
* Number of electronic materials acquired:
* Number of audio/visual units (audio discs, talking books, other recordings) acquired:

If “Activity – Mode” combination = “Content – Creation”:

* Number of items digitized:
* Number of items digitized and available to the public:
* Number of physical items:
* Number of open-source applications/software units/systems:
* Number of proprietary applications/software units/systems:
* Number of learning resources (e.g., toolkits, guides):
* Number of plans/frameworks:

If “Activity – Mode” combination = “Content – Preservation”:

* Number of items conserved, relocated to protective storage or rehoused or for which other preservation-appropriate physical action was taken:
* Number of items reformatted or migrated or for which other digital preservation-appropriate action was taken:
* Number of preservation plans/frameworks produced/updated (i.e., preservation readiness plans, data management plans):

If “Activity – Mode” combination = “Content – Description”:

* Number of items made discoverable to the public:
* Number of collections made discoverable to the public:
* Number of metadata plans/frameworks produced/updated:

If “Activity – Mode” combination = “Content – Lending”:

* Total number of items circulated:
* Average number of items circulated per month:
* Total number of ILL transactions:
* Average number of ILL transactions per month:

If “Activity – Mode” combination = “Planning and Evaluation”:

* Number of evaluations and/or plans funded:
* Number of funded evaluations/plans completed:

If “Activity” = “Procurement”:

* Number of equipment items acquired:
* Number of acquired equipment items used:
* Number of hardware items acquired:
* Number of acquired hardware items used:
* Number of software items acquired:
* Number of acquired software items used:
* Number of materials/supplies acquired:
* Number of acquired materials/supplies used:

**5. Partner Information**

**5.1** Identify the area(s) in which your partner organization(s) operates. (Check all that apply.)

\_\_\_ Libraries

\_\_\_ Historical Societies or Organizations

\_\_\_ Museums

\_\_\_ Archives

\_\_\_ Multi-Type Cultural Heritage Organizations

\_\_\_ Preschools

\_\_\_ Schools

\_\_\_ Adult Education Organizations

\_\_\_ Human Service Organizations

\_\_\_ Other

**5.2** Identify the legal type of the partner organization(s) for this project.

\_\_\_ Federal Government

\_\_\_ State Government

\_\_\_ Local Government (excluding school districts)

\_\_\_ School District

\_\_\_ Non-profit

\_\_\_ Private Sector

\_\_\_ Tribe/Native-Hawaiian Organization

**6. Beneficiaries**

**6.1** Is the activity directed at the library workforce (includes volunteers and trustees)?

\_\_\_ Yes (If yes, skip to “7. Locale.”)

\_\_\_ No

**6.2** If no:

**6.2.1** Is the activity for a targeted group or for the general population?

\_\_\_ Targeted group

\_\_\_ General population

**6.2.2** Which best describes the geographic community of the targeted group?

\_\_\_ Urban

\_\_\_ Suburban

\_\_\_ Rural

**6.2.3** Select one or more of the following activity target age groups.

\_\_\_ All ages

\_\_\_ 0-5 years

\_\_\_ 6-12 years

\_\_\_ 13-17 years

\_\_\_ 18-25 years

\_\_\_ 26-49 years

\_\_\_ 50-59 years

\_\_\_ 60-69 years

\_\_\_ 70+ years

**6.3** If “targeted group” selected in 6.2.1:

**6.3.1** Is the activity directed at those in one or more of the following economic situations?

\_\_\_ People who are living below the poverty line

\_\_\_ People who are unemployed

\_\_\_ Not applicable

**6.3.2** Is the activity directed at any of the following ethnic or minority populations?

\_\_\_ American Indian or Alaska Native

\_\_\_ Asian

\_\_\_ Black or African-American

\_\_\_ Hispanic or Latino

\_\_\_ Native Hawaiian or other Pacific Islander

\_\_\_ Not applicable

**6.3.3** Is the activity directed at families?

\_\_\_ Yes

\_\_\_ No

**6.3.4** Is the activity directed at intergenerational groups (not including families)?

\_\_\_ Yes

\_\_\_ No

**6.3.5** Is the activity directed at immigrants/refuges?

\_\_\_ Yes

\_\_\_ No

**6.3.6** Is the activity directed at those with disabilities?

\_\_\_ Yes

\_\_\_ No

**6.3.7** Is the activity directed at those with limited functional literacy or informational skills?

\_\_\_ Yes

\_\_\_ No

**6.3.8** Is the activity directed at groups that fall into a category not already captured?

\_\_\_ Yes

\_\_\_ No

If yes, please describe.

**7. Locale**

Is the activity statewide?

\_\_\_ Yes

\_\_\_ No

**7.1** If yes:

Institution Types (enter numbers):

Public Libraries:

Academic Libraries:

State Library Administrative Agency:

Consortia:

Special Libraries:

School Libraries:

Other:

**7.2** If no:

Can you identify specific institutions?

\_\_\_ Yes

\_\_\_ No

**7.2.1** If yes:

Institutions (attach separate list if necessary):

Name:

Address:

City:

State:

Zip:

**7.2.2** If no:

Institution Types (enter numbers):

Public Libraries:

Academic Libraries:

State Library Administrative Agency:

Consortia:

Special Libraries:

School Libraries:

Other:

**8. Project Outcomes**

**8.1** List any important findings or outcomes from your project. (This is a description of relevant outputs, outcomes and/or other results from your project. This area can be organized according to each separate activity reported if that is conducive to the ease of providing feedback.)

**8.2** Please briefly describe importance of findings. (This is a brief description of the significance of the outputs, outcomes and/or other results reported above. This area can be organized according to each separate activity reported if that is conducive to the ease of providing feedback.)

**8.3** What methods did you use to determine your findings? Check all that apply.

\_\_\_ Survey

\_\_\_ Review of Administrative Data

\_\_\_ Interview/Focus Group

\_\_\_ Participant Observation

\_\_\_ Other

**8.4** Based on outputs, outcomes and/or other results, explain any significant lessons learned from these findings for either the State Library or others in the Library and Information Sciences field. (This is a description of why the findings and outcomes reported are relevant to those in the library field.)

**9. Future Project Information**

**9.1** Do you anticipate continuing this project after the current reporting period ends?

\_\_\_ Yes (Skip to 9.3.)

\_\_\_ No

* 1. If no to 9.1, please describe why.
  2. If yes to 9.1, do you anticipate any change in level of effort?

\_\_\_ Yes

\_\_\_ No

**9.4** If yes to 9.3, please briefly describe any changes in the level of effort. Include information about whether you intend to use LSTA or match funds.

* 1. If yes to 9.1, do you anticipate any change in the project’s scope?

\_\_\_ Yes

\_\_\_ No

* 1. If yes to 9.5, please briefly describe this change in the project’s scope.

**9.7** If yes to 9.1, do you anticipate any other changes in the project?

\_\_\_ Yes

\_\_\_ No

**9.8** If yes to 9.7, please briefly describe any other anticipated changes.