

Friends of Kentucky Public Libraries, Inc. / Kentucky Sister Library Project

Grant Application Criteria

1. **The purpose of this reimbursable grant is to build sister library relationships. This money may be used for travel, speakers, program supplies, etc.**
2. **The grant shall be awarded April 20, 2017, at the KY Public Library Association's Award Luncheon.**
3. **At least one of the sister libraries in a partnership must have a Friends chapter that is a current member of the Friends of Kentucky Libraries, Inc. or at least one of the sister library's Board of Trustees must be a member of the Friends of Kentucky Libraries, Inc.**
4. **A library may apply for a grant one time during a calendar year.**
5. **All grant applications shall be made in writing and include an estimate of the total amount of money needed. Grant application narratives shall be limited to one page that explains the proposed use of the grant funds and how it relates to the goals and objectives of the project. A budget shall be attached. While the Friends of Kentucky Libraries, Inc. imposes no restrictions on how much money an individual may spend on travel, each is encouraged to follow the amounts allowed a Kentucky state employee.**
6. **Grant applications must be submitted to the Friends of Kentucky Libraries, Inc. by March 30, 2017.**
7. **Each grant recipient shall spend the money within 12 months of award.**
8. **Each grant recipient shall file a report within 30 days after the money is spent. The report shall be no more than two pages detailing what was done with the money and what was achieved. Receipts shall be attached. Recipients are also encouraged to supply digital photographs and/or videos that can be shared with FKL members on its website.**
9. **The Friends of Kentucky Libraries, Inc. will award one grant per year for \$400.00.**

Updated January 26, 2017

FRIENDS OF KENTUCKY LIBRARIES, INC.

GRANT APPLICATION FOR KENTUCKY SISTER LIBRARY PROJECT

FIRST LIBRARY'S CONTACT INFORMATION

Name of Library

Name of Library

Director

Address of Library

City

State

Zip Code

Telephone

Email

Name of Board

President of Board

Address of Board President

City

State

Zip Code

Telephone

Email

Name of Friends

Chapter

President of Friends
Chapter _____
Address of Chapter _____
President _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

After completion, please mail the entire grant application to Friends of
Kentucky Libraries, Inc. P.O. Box 537, Frankfort, Kentucky 40602 or email the
application to MaryLynn41@hotmail.com.

FRIENDS OF KENTUCKY LIBRARIES, INC.

GRANT APPLICATION FOR KENTUCKY SISTER LIBRARY PROJECT

SECOND LIBRARY'S CONTACT INFORMATION

Name of Library

Name of Library

Director

Address of Library

City

State

Zip Code

Telephone

Email

Name of Board

President of Board

Address of Board President

City

State

Zip Code

Telephone

Email

Name of Friends

Chapter

President of Friends
Chapter _____

Address of Chapter
President _____

City _____ State _____ Zip Code _____

Telephone _____ Email _____

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