

## **Direct Grants to Non-Government Archives Application Procedures and Documentation**

Applicants must submit ***all*** of the following *together in **one** package*:

- A completed application form;
- A budget (budget form attached) showing exactly how the funds requested are to be spent;
- A copy of the annual budget reflecting the funds allocated to archival collections care;
- A short (no more than one page) explanation of what the grant is to be used for and why the grant is needed;
- Museums, not-for-profit operations, historical societies, libraries, universities, colleges, and religious archives (those applicants who are not an official county or municipal archives) must provide a short (no more than one page) letter from the archivist, curator, collections manager, or librarian responsible for collections care explaining the nature of the archival collections, the basis of collections care, and why the archival collection is of historical importance;
- Written (no more than one page) recommendations from at least two (2) people who have professional competence in
  - archives or library management (other than someone associated with the applying organization)
  - public or institutional records management
  - historical research using public records
  - genealogy or local history
  - business or legal enterprises that have frequent recourse to public records
  - basics of archival collections care and maintenance

## **Deadline for Applications**

Applications must be *received* by TSLA *no later than* close of business **October 4, 2016**

**Application Address:      Myers Brown  
Archives Development Program  
Tennessee State Library and Archives  
403 Seventh Avenue North  
Nashville, TN 37243-0312**

Phone:            (615) 253-3470  
FAX:             (615) 532-5315  
E-mail:          [myers.brown@tn.gov](mailto:myers.brown@tn.gov)

**Direct Grants to Non-Government Archives  
APPLICATION FORM**

Name of organization: \_\_\_\_\_

Type of organization: \_\_\_\_Museum      \_\_\_\_Religious Archives      \_\_\_\_ Library

\_\_\_\_ Historical Society      \_\_\_\_ University Archives (or Special Collections)      \_\_\_\_ Other

Governing Body: \_\_\_\_\_

Complete mailing address of organization: \_\_\_\_\_

\_\_\_\_\_

Name of archivist/curator/librarian/or project manager: \_\_\_\_\_

Phone number of the above: \_\_\_\_\_ E-mail address of the above: \_\_\_\_\_

Name of the executive with legal authority to sign contracts: \_\_\_\_\_

Mailing address for executive listed above: \_\_\_\_\_

\_\_\_\_\_

Phone number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Organizations FEIN number: \_\_\_\_\_ Edison ID number: \_\_\_\_\_

The archivist/curator/librarian/project manager reports to: \_\_\_\_\_

Date archives established: \_\_\_\_\_

Scheduled days and hours of operation: \_\_\_\_\_

Scheduled hours open to the public: \_\_\_\_\_

Amount requested: \$ \_\_\_\_\_

To be spent for: \_\_\_\_\_

\_\_\_\_\_

Date span of archives (years of oldest and newest records): \_\_\_\_\_ to \_\_\_\_\_

Describe briefly the principal kinds of records and their **approximate** volume in cubic feet (linear shelf feet)<sup>1</sup> that your organization keeps and makes available to the public:

Record Group, Type or Series [e.g.: <b>Smith family papers and photographs</b> ]	Volume in Cubic Feet <b>20.0</b>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Typed name and title of person making request: \_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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<sup>1</sup> A rough approximation is acceptable. Precise measurement is not required.

**Direct Grants to Non-Government Archives**  
**PROPOSED GRANT BUDGET**

In support of the grant application and contract, grantees are required to provide budget information on how the funds, if granted, are to be spent. **Grantees are accountable to the Tennessee State Library and Archives for the expenditure of the budgeted funds for the objects identified in the budget. Any changes the grantee wishes to make that require the expenditure of the granted funds on any object other than those declared in this budget must receive the prior written approval of the Tennessee State Librarian and Archivist or his designated representative.**

Name of Organization: \_\_\_\_\_

**Total Grant Requested: \$ \_\_\_\_\_ .00**

<u>Object, Service, or Matter to be Procured</u>	<u>Quantity</u>	<u>Budgeted Cost<sup>2</sup></u>
1. _____	_____	\$ _____ .00
2. _____	_____	\$ _____ .00
3. _____	_____	\$ _____ .00
4. _____	_____	\$ _____ .00
5. _____	_____	\$ _____ .00

**Total Budgeted Expenditure: \$ \_\_\_\_\_ .00**

Date: \_\_\_\_\_

Typed Name and Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Name and title of officer who authorizes expenditures from the grant funding budget and is accountable accordingly.

\_\_\_\_\_  
<sup>2</sup> To the nearest whole dollar.

## CHECKLIST OF SUPPORTING MATERIALS

*The following materials are submitted in support of this grant application:*

- \_\_\_\_\_ Completely-filled-out application form (2 pages)
- \_\_\_\_\_ Completely-filled-out budget for expenditure of funds if granted
- \_\_\_\_\_ Copy of the budget allocated to the archives or to collections care by the applying organization; OR a letter from the director, chair of the board of directors, or department head certifying a fair estimate of the funds expended on archives or collections care by the governing body from any other source in the past year
- \_\_\_\_\_ One-page explanation of what the grant is to be used for and why the grant is needed
- \_\_\_\_\_ One-page letter from the archivist, curator, collections manager, or librarian responsible for overseeing the archival collections explaining how the applying organization manages and cares for its archival collections consistent with nationally accepted standards for archives management and care and explain the historical significance of the collection
- \_\_\_\_\_ Two (2) one-page letters of recommendation
- \_\_\_\_\_ Other (Specify, any additional materials submitted voluntarily in support of the application)

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Signed: \_\_\_\_\_  
Archivist/Curator/Collections Manager/Librarian/Director/Board Chair