New Jersey Library Makerspaces - The Leading Edge

2013-2014

A Joint Initiative of the New Jersey State Library and LibraryLinkNJ

**Application & Instructions**

All the documents describing and supporting the Makerspaces Project can be found on the LibraryLinkNJ website. Please read them carefully and completely.

**Application Deadline:**

* The completed application must be received **by 4:00 pm, Wednesday, December 11, 2013.** Applicant is responsible for ensuring receipt of application. An earlier application submission is allowed.

**Certification and Required Format of Application:**

*Application Certification Form:* (signed).

* Applications that do not include the signed *Application & Certification* will be disqualified.
* The President of the Library Board of Trustees, or equivalent governing body, must sign the *Application & Certification Form* unless the library director has been authorized to sign by the board or equivalent governing body.

*Application Format:*

* Save a copy of the *Application Format* and use it as a template to supply the information for the required sections.

**Email Submission to:** coconnor@librarylinknj.org

* Applicant is responsible for ensuring receipt of application.
* Cheryl O’Connor, Executive Director, LibraryLinkNJ – The New Jersey Library Cooperative, will receive all applications by email attachment and will coordinate the application review and evaluation.

LibraryLinkNJ and its services are funded by the New Jersey State Library, which is responsible for the coordination, promotion and funding of the New Jersey Library Network.

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**APPLICATION CERTIFICATION FORM**

**APPLICANT:**

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 LIBRARY/INSTITUTION/SCHOOL DISTRICT NAME

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 ADDRESS

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 CITY STATE ZIP

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 COUNTY

**PROJECT DIRECTOR:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FAX#:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Application Deadline:**

The completed application must be received no later than 4:00 pm, **Wednesday, December 11, 2013.** An earlier submission is allowed.

**TOTAL AMOUNT OF FUNDS REQUESTED:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPLICATION CERTIFICATION:** To the best of my knowledge and belief, data in the application are true and correct. The document has been duly authorized by the governing body of the applicant and the applicant will comply with the project parameters, if its funding is approved.

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NAME AND TITLE SIGNATURE

**Application & Certification Form must be signed.** The President of the Library Board of Trustees, or equivalent governing body, must sign the *Application & Certification Form* unless the library director has been authorized to sign by the board or equivalent governing body.

**Send completed forms by email attachment no later than 4:00 pm, Wednesday, December 11, 2013, to:** Cheryl O’Connor, Executive Director, LibraryLinkNJ at coconnor@librarylinknj.org. An earlier submission date is allowed.

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**REQUIRED APPLICATION FORMAT**

<http://librarylinknj.org/sites/default/files/pdfs/MakerspacesProjectForm.docx>

This form was used successfully during FY13 Statewide Strategic Planning when task forces developed special projects. It will assist you in considering the pertinent aspects of your Makerspace Project development.

**Send completed forms by email attachment no later than 4:00 pm, Wednesday, December 11, 2013, to:** Cheryl O’Connor, Executive Director, LibraryLinkNJ at coconnor@librarylinknj.org. An earlier submission date is allowed.