

# Funding Application

Thank you for your interest in becoming a part of Libraries Lead with Digital Skills! The information you submit in this application will be sent to the Public Library Association. We look forward to reviewing your application.

The Public Library Association, American Library Association, and Google are thrilled to work with public libraries like yours to get people the skills they need to grow their careers and businesses. As library staff, we know you play a pivotal role in developing your community by providing key digital resources and guiding your patrons on how to maximize them.

If you have any questions regarding the application and process, contact the Libraries Lead Team at: [librarieslead@gmail.com](mailto:librarieslead@gmail.com).

Full program details and a preview of this application are available at: [www.ala.org/pla/initiatives/google](http://www.ala.org/pla/initiatives/google)

\* Required

## Contact Information

Let's start with basic information so we can contact you about the status of your application.

### 1. First and Last Name \*

Please provide your first and last name, or that of the library staff person responsible for this grant application.

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### 2. Official Name of Library \*

The library, branch, or system name if applicable

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### 3. Library Address \*

Include the full address of the library including city, state, postal code

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### 4. Library Website (URL)

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### 5. Email Address \*

Provide your official library email address, or that of the library staff person responsible for this grant application.

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### 6. Phone Number \*

Provide your phone number, or that of the library staff person responsible for this grant application.

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7. Library Social Media Handles

If your library has social media accounts (Twitter, Instagram, Facebook, etc.) please include the handles so we can follow you and your programs online!

About Your Program

Please provide us with details about the specific digital skills program you will implement during the grant period.

8. Which theme describes your virtual program, service or outreach expansion? \*

Check all that apply

Check all that apply.

- Assist Job Seekers to Find or Prepare for Work
- Empower Small Businesses to Grow Online

9. Which of the following Grow with Google or PLA tools will you use in your virtual program, service or outreach expansion? \*

You can always change them later if needed!

Check all that apply.

- Applied Digital Skills (Create a résumé, Preparing a Business Plan, etc.)
- Jobs on Google Search
- Grow With Google Partner Program
- Primer
- Get Your Business Online
- DigitalLearn.org

Other:  \_\_\_\_\_

10. What is your idea for the virtual program, service or outreach expansion you will design and implement? \*

Be sure to give specifics, such as the target audience, how many people you anticipate reaching, communication methods, how you will use the Grow With Google tools you indicated above, etc.

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11. When will this virtual program, service or outreach expansion take place?

Please share dates or if you haven't scheduled it yet, an approximate range and frequency (one day? one a week for 5 weeks?)

Confirm & Submit

Almost done! Let's confirm your application information and the ALA privacy policy.

## 12. Eligibility

Please review the following eligibility requirements carefully. By affirming these items, you agree that if selected for funding, the program in your application will be able to comply with each of them.

*Check all that apply.*

|  | Yes                      |
|--|--------------------------|
| Is your library located in the United States (50 states or the District of Columbia)   | <input type="checkbox"/> |
| Is your program free of cost (including deposits) for attendees to participate?  | <input type="checkbox"/> |
| If selected for funding, will you be able to implement the program in your application within 60 days of notification of pre-approval?   | <input type="checkbox"/> |
| Do you understand that if your application is selected, you will receive a pre-approval notice but will only receive funding after you hold your event and return a completed report showing successful accomplishment of your program to PLA? | <input type="checkbox"/> |
| If selected for funding, will you be able to share photos, video, or other relevant media of your funded program in local media and social media?  | <input type="checkbox"/> |
| Do you have prior approval from your library administration to implement this program? Verification may be required upon request.  | <input type="checkbox"/> |

## 13. I affirm that all of the information provided in this application is true and accurate to the best of my knowledge \*

*Mark only one oval.*

Yes

No

## 14. PERSONAL DATA NOTIFICATION POLICY \*

The ALA (American Library Association, its units and divisions) (collectively "ALA") use the personal data you provide to the ALA to process membership, inform you of products, services, conferences, education opportunities, events and for other purposes which are within the Association's mission. To accomplish these actions, ALA contracts with third-parties who gather and process personal data to complete interactions such as online purchases, conference registration, and fulfillment. The personal data as provided is processed and stored as a legitimate Interest to the ALA in order to fulfill your requests for information and services from ALA. Additional information can be found at <http://www.ala.org/personal-data-notification>.

*Check all that apply.*

Agree

