

# Maine Memory Network Community Mobilization Grants

## MCHP APPLICATION

### I. PROJECT SUMMARY

**A. Community:** \_\_\_\_\_

Population (check one):    \_\_\_ less than 1,000    \_\_\_ 1,000-5,000    \_\_\_ 5,000-10,000    \_\_\_ 10,000+

State Representative: \_\_\_\_\_ State Senator: \_\_\_\_\_

Local Newspaper: \_\_\_\_\_

**B. Team.** Please list the name of each partnering organization on your MCHP team. You must include a historical organization, a library, and a school. Additional partners are optional. **Each partner, including the lead organization, must complete a separate Project Partner Form (Appendix A) to be included with the application.**

Historical Partner: \_\_\_\_\_

Library Partner: \_\_\_\_\_

School Partner: \_\_\_\_\_

Additional Partner (if applicable): \_\_\_\_\_

Additional Partner (if applicable): \_\_\_\_\_

Additional Partner (if applicable): \_\_\_\_\_

### II. LEAD ORGANIZATION

**A.** Which of the above organizations is taking the lead on the project and application process?

\_\_\_\_\_

**B.** Is this institution either a unit of state or local government or a private not-for-profit organization that has tax-exempt status under the Internal Revenue Code?  Yes  No

### **C. Lead Organization Contact Information**

Mailing Address (Street/PO Box): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Organization Website: \_\_\_\_\_

Internet Access?  Yes  No High-speed?  Yes  No Wireless?  Yes  No

Project Coordinator/Primary Contact: \_\_\_\_\_

Role at Organization: \_\_\_\_\_

Email Address: \_\_\_\_\_

Organization Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Best times to contact: \_\_\_\_\_

Organization's Authorizing Official: \_\_\_\_\_

**III. FISCAL AGENT** *(Complete only if lead organization is not an eligible non-profit.)*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

**IV. TECHNOLOGY RESOURCES AND EXPERIENCE**

**A.** Please describe your team's skills, experience, and comfort using digital tools and technology.

---

---

---

**B.** Describe computer and scanning equipment your team currently has access to. (Include brand, model, age of equipment, hard drive capacity, amount of memory, etc.) \_\_\_\_\_

---

---

**C.** Describe any image editing software you currently use or have access to (e.g. Photoshop 5.5).

---

---

**D. MMN Contributing Partner.** Is your organization or any of your project partners currently Maine Memory Network Contributing Partners (CPs)?  Yes  No

## V. PROJECT NARRATIVE

Please answer the following questions on separate pages appended to the application form. Your responses should reflect the input and understanding of all partners and convey your team's interest, enthusiasm, and commitment to the project. Add any additional information you feel is relevant. **(Limit responses to a maximum of nine *total* pages.)**

### A. Team Statement (Page limit for this section: 3 pages)

1. Please describe your team, community, and why you want to participate in the Maine Community Heritage Project. What specific needs does it address?
2. Please describe your team's goals for creating a website dedicated to the history of your community on Maine Memory Network.
3. Please provide a brief description of historical themes, topics, activities, collections, and resources that your team might be particularly interested in exploring and sharing.
4. What skills and capacity does your team hope to gain through participation in the program?
5. Is participation tied to other initiatives in your community (e.g. a town anniversary, Main Street revitalization, Museums In the Street, school-based service learning, etc.)?
6. Describe how you will promote and share your participation in MCHP, and its end-product, the local history website, with the community.

### B. Partner Statements (Limit for *each* partner statement: 2 pages, or 6 pages total for this section)

Each partner must answer the following questions.

#### **Library Statement**

1. Please describe your library's goals for participating in this program.
2. Provide a brief description of your library and its role in the community.
3. Please describe your library's strengths and any current challenges.
4. What particular interests and resources—in terms of staff, collections, facilities, equipment, etc.—does your library bring to the team?
5. Please describe how your library currently promotes or provides access to local history resources.
6. How do you think deeper collaboration with community partners will benefit your library?

#### **Historical Organization Statement**

1. Please describe your organization's goals for participating in this program.
2. Provide a brief description of your facilities, membership, and current role in the community.
3. Please give an overview of your collections. What types of original historical material do you have? What is the scope of your collections? Describe how your organization currently makes collections available to the public.
4. How do you think deeper collaboration with community partners will benefit your organization?

#### **School Statement**

1. Please describe your school's goals for participating in this program.
2. Please describe your school community, its strengths, and its current challenges.
3. What subjects/grade levels do you teach and how often do your classes meet?
4. Approximately how many students do you anticipate will participate in the project? How much time do you anticipate your students spending on this project during the school year?
5. What kinds of educational experiences do you hope they will have?
6. What skills and experience do you and your students bring to the team?
7. How do you think collaborating with the community will benefit your teaching, the students, and the school?

**VI. BUDGET**

Please summarize in the table below the expenses that you *anticipate* incurring while carrying out your project. Suggested categories, with sample expenses, are provided. Only use those categories relevant to your project. Round up to the nearest dollar. Then provide an explanation for each line item (see B. Budget Explanation).

Grant funds may only be used for costs directly related to the project during the grant period. Organizations may request up to \$4,000 for the MCHP. Amounts of individual line items can be altered slightly, or re-allocated, once the project is underway if the team’s needs change. Once awarded, however, the total grant figure cannot be increased.

For suggestions on how to complete this budget section, see **Appendix B**, which provides a sample budget. There is also a detailed budget planning document under the Project Planning section of the MMN Resources page ([www.mainmemory.net/resources](http://www.mainmemory.net/resources)).

**A. Budget Summary**

**CATEGORY                      EXPENSE                                      SOURCE/VENDOR                                      AMOUNT REQUESTED**

***Equipment (computers, scanners, digital cameras, recording equipment, software, etc.)***

1)			
2)			
3)			
4)			
5)			

***Supplies (white gloves, paper, ink, archival boxes, folders, flash drives, etc.)***

1)			
2)			
3)			
4)			
5)			

***Staff Support (library staff, substitute teachers, etc.)***

1)			
2)			
3)			
4)			

***Services (e.g. writing, assessment of collections, technology assistance)***

1)			
2)			
3)			
4)			

***Travel (including school transportation)***

1)			
2)			
3)			

***Other (food for events/meetings, etc.)***

1)			
2)			
3)			

**TOTAL Stipend Requested: \$ \_\_\_\_\_**



## VII. AGREEMENT TO TERMS / AUTHORIZING SIGNATURES

By signing this application form, the applicant organization and all partners (if applicable) hereby indicate agreement with the following terms and conditions:

- 1) The information contained in this application is true and correct to the best of our knowledge.
- 2) Each signer acknowledges that his or her organization supports and is fully committed to participating in and meeting the project's objectives.
- 3) The applying organization is a non-profit, 501(c)(3) federal tax-exempt organization, public school, public agency working for the State of Maine, or an Indian tribal government (or its political subdivision) recognized by the Department of the Interior—OR has a written agreement with a fiscal sponsor that is a 501(c)(3) organization, public school, or agency. Any grant funds received as a result of this application will be returned if the grant recipient loses its exemption from federal income taxation as provided for under section 501(c)(3) of the Internal Revenue Code.
- 4) Any funds received as a result of this application will be used for the purposes specified herein. Funds will be expended within 12 months of the payment date. At the end of this period, any unexpended funds will be returned to Maine Historical Society, or a written request for an extension of time will be submitted to MHS for approval. An evaluation report will be submitted upon completion of the project by the due date specified in the award notification.
- 5) Each historical partner agrees to share digital images of items in their collection on Maine Memory Network. (MHS staff can discuss how that process works and address any questions.)

***Please note the required signatures on the form must be original, signed in person (not electronically rendered). However, the entire form may be scanned and submitted electronically.***

### Lead Organization:

Signature of Project Coordinator: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Authorizing Official: \_\_\_\_\_ Date \_\_\_\_\_

### Partners:

Signature of Representative of Fiscal Agent: \_\_\_\_\_ Date \_\_\_\_\_

*(if different from Project Coordinator)*

Representing: \_\_\_\_\_

Partner #1: \_\_\_\_\_ Date \_\_\_\_\_

Representing: \_\_\_\_\_

Partner #2: \_\_\_\_\_ Date \_\_\_\_\_

Representing: \_\_\_\_\_

Partner #3: \_\_\_\_\_ Date \_\_\_\_\_

Representing: \_\_\_\_\_

Partner #4: \_\_\_\_\_ Date \_\_\_\_\_

Representing: \_\_\_\_\_

**APPENDIX A: PROJECT PARTNERS INFORMATION**

*Each partner organization, including the lead organization, must complete its own copy of this form. Please do not submit one form for multiple organizations. **Note to Lead Organization:** Please write "Lead Organization" under Organization Name and skip ahead to Section 2. Additional forms are available for download at [www.mainememory.net/grants](http://www.mainememory.net/grants).*

**I. CONTACT INFORMATION**

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

Organization Type:

Historical Organization     Library     School     Town Office/Department/Board

Other (please explain) \_\_\_\_\_

Organization Mailing Address (Street/PO Box): \_\_\_\_\_

City/State/Zip/County: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Role: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Organization Website: \_\_\_\_\_

Internet Access?  Yes  No    High-speed?  Yes  No    Wireless?  Yes  No

**II. PARTNER DEMOGRAPHICS**

**A. For Libraries**

Is your library a member of the Maine Regional Library System?  Yes  No

Did your library submit a 2010 Public Library Annual Report?  Yes  No

Please list the hours you are open to the public: \_\_\_\_\_

Is your library open year-round?  Yes  No    Approximate Budget: \_\_\_\_\_

No. paid staff: \_\_\_\_\_ No. volunteers: \_\_\_\_\_ No. cardholders: \_\_\_\_\_

**B. For Historical Organizations**

Does your organization have a facility (e.g. museum, historic house, etc.)?  Yes  No

Please describe: \_\_\_\_\_

Please list the days and hours you are open to the public: \_\_\_\_\_

\_\_\_\_\_ Is your facility open year-round?  Yes  No

No. paid staff: \_\_\_\_\_ No. volunteers: \_\_\_\_\_ No. members: \_\_\_\_\_ Year founded: \_\_\_\_\_

**C. For Schools**

Please check one:     Public     Private     Charter

Grade Levels: \_\_\_\_\_ School Population: \_\_\_\_\_

Name of Principal: \_\_\_\_\_

Principal's Email Address: \_\_\_\_\_

Superintendent: \_\_\_\_\_ District: \_\_\_\_\_

Percentage of students eligible for free or reduced lunches: \_\_\_\_\_

Current educational initiatives your school participates in (e.g. Great Schools; Gates Foundation Schools; 21<sup>st</sup> Century Learning; service learning; etc.): \_\_\_\_\_

What other school personnel will be involved in the project? (e.g. school librarian, tech integrator, fellow teacher on your team, etc.)? \_\_\_\_\_

## APPENDIX B: BUDGET SAMPLE

<u>CATEGORY</u>	<u>EXPENSE</u>	<u>SOURCE/VENDOR</u>	<u>AMOUNT REQUESTED</u>
-----------------	----------------	----------------------	-------------------------

**Equipment**

1) Epson V700 Scanner	Staples.com	\$ 600
2) Adobe Photoshop Elements 9	Staples.com	\$ 100
3) Mac OS X laptop	MLTI program (overstock)	\$ 400
4) Canon PowerShot SX210	Best Buy	\$ 300

**Supplies**

1) 2 dozen pairs white gloves	Gaylord.com	\$ 30
2) Acid free boxes	Gaylord.com	\$ 200

**Staff Support**

1) Extend ref librarian hours	Public Library	\$1200
2) 6 substitute teacher days	School	\$ 600

**Services**

1) Bus transportation	School	\$ 150
-----------------------	--------	--------

**Other**

1) Snacks	Hannaford	\$ 210
-----------	-----------	--------

**TOTAL Stipend Requested:       \$3,790**

**Equipment**

1. Our historical society does not own a scanner; most of the work will be done there. We checked this price online. There is no shipping charge.
2. We will need to purchase image software. We checked this price online. There is no shipping charge.
3. We would like to purchase a laptop for ease of transport. The school we're working with has some of last year's MLTI laptops that they can make available at a reduced rate. This is the amount they quoted.
4. We have a number of artifacts in the historical society and library that the students want to photograph for the exhibit. This high-quality digital camera is available currently for \$299 at WalMart. We are a tax-exempt organization so we won't need to factor in tax.

**Supplies**

1. White gloves from Gaylord.com come in a 12-pack for \$10.59. We'd like to have some for the team, and to use with students who will be working on the project. This also factors in shipping costs.
2. Following scanning and cataloging, we will be properly archiving a number of photos and others documents that have been improperly stored at the historical society. We need to purchase acid-free boxes in a variety of sizes. \$200 is an estimate based on looking at prices on Gaylord.com.

**Staff Support**

1. In order to work on this project, the reference librarian will need to put in additional time: 10 hours/month x 8 months x \$15/hour = \$1,200.
2. We estimate that the teacher on the team will need to be out of the classroom for six days. Covering a substitute is \$100/day.

**Services**

1. We will be taking students on a field trip through town, stopping at several historic sites. This is the fee for renting a bus for the half-day activity.

**Other**

2. We will be bringing 10-20 students to the historical society several times and want to provide snacks. We estimate 6 visits x \$35/snacks = \$180. This is based on a variety of snacks purchased from Hannaford (cider, cookies, fresh fruit, sweets).