Library Information

Project Director

The project director is responsible for implementing the project.

First Name  Erik
Last Name  Cameron
Email Address  root@mcs.com
Phone Number  234 234 9787
Extension
(optional)

Library Name | ALA

Address Line 1 50 E. Huron

Address Line 2

(optional)

City | Chicago

State | Illinois ▼

ZIP Code | 60615-0888

9 digits, xxxxx-xxxx. If you need to find your 4-digit sort code, you can look it up at the website of the US Postal Service.

Library Setting | Please Select ▼

Population Size | Please Select ▼

Average Monthly Visitors

Website

(optional)

Percentage of population that speaks a language other than English at home

Number of full-time employees

Number of part-time employees

Number of volunteers

Number of staff and volunteers currently providing literacy services for adult learners

Save Use this button to save your answers and begin your application.
Update Successful.

Project Information

Proposal Pages

- Library Information
- Project Information

Please provide the name of your American Dream project.

Project name

Do your proposed grant funded activities include: (check any that apply)

- [ ] ABE
Adult Literacy Need

Indicate the need for literacy services for adult learners and/or basic education and workforce development for adults at your library and in your community. Using the most recent U.S. Census and other data, describe the demographics of the community served by the library.

Which geographical area does your library serve?
What is the area’s unemployment rate?

What is the median household income in the area?
What percentage of the population lives below the poverty line?

What are the estimated literacy rates in the community?
What is the community's high school graduation rate, and if available, dropout rate?

Data Collection and Community Engagement

How have data collection and community engagement helped you determine the needs of the adult learner population you serve? Please be as specific as possible. (250 words maximum)
Describe in detail your proposed project for adult learners, including the following information in your narrative. (500 words maximum)

- What is the project design?
- Are the services new or an expansion of existing services?
- Whom will you be serving? Is this/are these population(s) new to your community?
- How will these literacy services for adult learners benefit the library and the community?
- Will your project include bookmobile-based literacy services for adult learners? If so, please describe your current bookmobile literacy services and how the proposed project will augment those services.

Capacity

Detail how your library has the capacity to implement this project, including: (250 words maximum)

- How will you staff this initiative? (include library staff and any contract or partner organizations staff)
- What in-kind support will the library provide, such as meeting space, printing and distribution, collections development, IT support, matching funds, etc.?
Outreach and Collaboration

Indicate your plans for working with partners, if applicable, and the community at large to facilitate and promote the project. (250 words maximum)

- Provide a list of your community partners, if applicable, and indicate what, specifically, each of the partners will contribute to the project.
- How will volunteers contribute to this initiative?
- How will you publicize and promote this project within the library and to the community at large?
Evaluation and Sustainability

Detail how you will evaluate and sustain the initiative, including the following information: (250 words maximum)

- This project grant requires use of American Dream Project Outcome tools. In addition to those tools, how does your library measure impact and outcomes for adult literacy efforts?
- Please explain your library’s plans for sustaining adult literacy efforts and how the proposed grant funded activities relate to these plans. How will your library continue to provide literacy services when the grant ends?
My library agrees to use the American Dream Literacy Initiative Project Outcome measurement tools and platform for participant evaluation for any grant funded programs.

I acknowledge and agree to the terms above.

Letters of Support

Please upload letters of support from two or more community partners. Letters should include the organization's fiscal and in-kind contributions to the proposed American Dream project.

Permitted file types: pdf, doc, docx, rtf, xls, xlsx, csv, jpg, jpeg, png, gif, tiff, ppt, pptx, zip

To upload a file, click "Choose File." After you have selected a file, click "Upload" to attach it. Maximum file size is 10 megabytes.

File

Choose File

No file chosen

About

(optional)

Upload

Save Use this button to save your work at any time.
Project Budget and Justification

Proposal Pages

- Library Information
- Project Information
- Project Budget and Justification

Budget

Enter your project budget in the table below. Include a dollar amount for projected in-kind contributions. Please note:

- Total grant funds must not exceed $10,000
- Funds will be awarded on a one-time basis
- Grant funds may **not** be used for bookmobile maintenance

<table>
<thead>
<tr>
<th>Grant Funds</th>
<th>In-kind Funds</th>
<th>Other Funding Sources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Category</td>
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</tr>
<tr>
<td>Personnel</td>
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<td></td>
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<tr>
<td>Library staff, contractors, teachers and tutors</td>
<td>0.00</td>
<td></td>
<td></td>
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<tr>
<td>Collection Development</td>
<td>0.00</td>
<td></td>
<td></td>
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<tr>
<td>Print, digital, software, and online resources</td>
<td>0.00</td>
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<tr>
<td>Outreach and Collaboration</td>
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<tr>
<td>Materials, resources, and supplies for offsite services and programs</td>
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<tr>
<td>Printing, Design and Distribution</td>
<td>0.00</td>
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<tr>
<td>Flyers, brochures, web design, etc.</td>
<td>0.00</td>
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<tr>
<td>Media, Marketing and Production</td>
<td>0.00</td>
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<td>Audio and video spots, videos for training and PR, website development, etc.</td>
<td>0.00</td>
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<td>Technology</td>
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<tr>
<td>Laptops, tablets, e-readers, etc.</td>
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<td>Travel</td>
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<td>State and regional library literacy conferences, partner meetings, etc.</td>
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<td>Other</td>
<td>0.00</td>
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<td>Please explain in the comments below.</td>
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<tr>
<td>Total</td>
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</tbody>
</table>
Comments (optional)

Budget Justification

Please provide a brief narrative detailing a breakdown of the grant funds for each category of funding you are requesting. For example, if you are requesting $5,000 for Collection Development, provide specifics of how you intend to spend grant monies to expand your print, digital, software, and/or online resources. (250 words maximum)
Certifying Official

Proposal Pages

- Library Information
- Project Information
- Project Budget and Justification
- Certifying Official

Please identify a certifying official, who is authorized to submit applications on behalf of the organization. To complete this section, you must enter all of the required information.

Certifying Official First Name

Certifying Official Last Name
By checking this box and submitting this application, the authorized representative for the applicant herein are true and correct to the best of his or her knowledge and belief; and that the applicant organization (including, when pertinent, each additional library branch on whose behalf it is applying) is neither presently debarred, suspended, nor voluntarily excluded from participation in this transaction by any federal department or agency. You regard to debarment at the website of the System for Award Management.