



Kentucky Department for Libraries and Archives
Local Records Program

Grant Application

Please review the Local Records Program Grants Guidelines: [LRGrantGuidelines.pdf \(ky.gov\)](#) and consult with your Regional Administrator before completing this form. Attach three (3) written, itemized, project bid proposals for each project section. Please send the completed application to:

Email (preferred)

LRB.Application@ky.gov

Mail

Local Records Branch
Kentucky Department for Libraries and Archives
P.O. Box 537
300 Coffee Tree Road
Frankfort, Kentucky 40602-0537

Fax

Local Records Branch
(502) 564-5773

Contact Information

Local Government Agency: _____

Applicant Name:
(Records Custodian/Officer) _____

Applicant Title: _____

Primary Point of Contact: _____

Office Address: _____

Phone Number:
(Including area code) _____

Email Address: _____

Federal ID Number: _____

Project Summary

Total Funds Requested: \$ _____

Please provide a complete description of the proposed project: Describe the project scope and expected results. Explain why the identified records are selected for preservation; and their historical significance and relevance to the community. Identify key agency personnel and their role(s) in the project. Explain the agency's contribution to the project: working space, equipment storage, staff or monetary contribution. Describe how the completion of this project will assist the agency's records management program.



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Plan of Work

Please list the lowest bid project vendor(s) for each section.

Section I

Purpose: _____

Vendor: _____

Vendor Contact: _____

Vendor Address: _____

Vendor Phone and Email: _____

Records	Date	Series	Cost
<i>Quality Control (Add 12.5% of the microfilming cost)</i>			
Total Section I Cost			

Section II

Purpose: _____

Vendor: _____

Vendor Contact: _____

Vendor Address: _____

Vendor Phone and Email: _____

Records	Date	Series	Cost
<i>Quality Control (Add 12.5% of the microfilming cost)</i>			
Total Section II Cost			



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Section III

Purpose: _____

Vendor: _____

Vendor Contact: _____

Vendor Address: _____

Vendor Phone and Email: _____

Records	Date	Series	Cost
<i>Quality Control (Add 12.5% of the microfilming cost)</i>			
Total Section III Cost			

Section IV

Purpose: _____

Vendor: _____

Vendor Contact: _____

Vendor Address: _____

Vendor Phone and Email: _____

Records	Date	Series	Cost
<i>Quality Control (Add 12.5% of the microfilming cost)</i>			
Total Section IV Cost			

** Please Attach Additional Sections, if needed**



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Can these records be removed from the office during the project? Yes No N/A

In what format do these records exist? Select all that apply.

Paper Electronic Files Microfilm Microfiche Aperture Cards Plats

Other: _____

Where are project records located? How does your agency provide for the long-term survival and accessibility of agency records? Are the records stored in a secure, climate controlled and fire-resistant facility, with adequate storage space, and proper security and supervision? Please explain.

Project Outcomes

Describe project outcome(s) and explain the significance of each. How will the project outcome(s) assist with the management of project records? How will project outcome(s) advance the agency's records management program?



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Commitment of Local Government:

Explain the ways your agency contributes resources to records management: Does your agency engage in the regular disposition of records in accordance with applicable records retention schedules? Does your agency separate inactive or non-current materials from active files? Does your agency provide records management training to agency staff? Explain your agency's records management program.

How does your agency ensure records are available to the public? Explain how your agency ensures access to records per the state's Open Records Law (KRS 61.870-876).

Additional information/comments:

Did you work with your Regional Administrator (RA) when completing this application? What records management assistance did the RA provide to your agency?



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Part D: Certification

Statement regarding expenditure of funds: The applicant agrees that funds granted under the Local Records Program will be spent solely in accordance with the project description and budget statement presented in this application. The grant recipient acknowledges that any changes in the submitted plan of project work, funding, or length must be submitted in writing to, and approved in advance by, the Kentucky Department for Libraries and Archives.

Statement regarding archival and records management policies and procedures: The applicant agrees to comply with all policies, procedures, and standards deriving from Kentucky Revised Statutes, Kentucky Administrative Regulations, as well as the policies of the Kentucky Department for Libraries and Archives and the State Libraries, Archives, and Records Commission concerning management, preservation, reproduction, and storage of public records in addition to those dealing with the official recording of such records in government offices, whether on paper, microfilm, or other medium.

Statement regarding project status and financial expenditure reporting: The applicant agrees to submit biannual Project Status and Financial Expenditure Reports during the course of the project and at the end of the project as specified in the grant contract. The grant recipient also agrees to create a separate grant fund account, maintain separate financial and programmatic records on this project, and retain source documentation such as canceled checks, paid invoices, payrolls, or other accounting documentation, which would facilitate an audit as required by statute, regulation, or administrative procedure.

Statement regarding continued records management and preservation support: The applicant agrees to make budgetary allowance to continue the work begun by this project to better manage, preserve, and secure the current and future records of this agency. The applicant also recognizes that such an allowance is a necessary operating expense that must be budgeted for on a regular basis

Statement regarding the Americans with Disabilities Act: The applicant agrees to comply with the Title II provisions of the Americans with Disabilities Act and to submit to the Department, upon request, documentation that demonstrates compliance with the Title II requirements of the Americans with Disabilities Act.

Statement regarding State and Local Procurement: The applicant agrees that it has complied with all state and local procurement requirements to obtain bids as part of this application process.

Local Government Authorized Official Signature

Official Custodian of Records

Printed Name and Title

Printed Name and Title

Date

Date