LibraryLinkNJ Mobile Pilot Project - FY2012
New Jersey Libraries-On-The-Go

Mobile Project Application & Instructions
APPLICATION FORM B - FOR
LIBRARIES THAT HAVE ALREADY IMPLEMENTED
A MOBILE APP OR MOBILE WEBSITE PROJECT

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

Application Deadline:

The completed application must be received no later than 4:00 pm, Wednesday, February 29, 2012.

Submit the following completed forms by email attachment:

- **Application & Certification Form:** (signed)
  
  Applications that do not include the signed Application & Certification will be disqualified.

- **Application Form B:**

  Save a copy of the Application Form appropriate for your project and use as a template to supply the information for each of the required sections.

**IMPORTANT NOTE:** The President of the Library Board of Trustees, or equivalent governing body, must sign the Application Title & Certification Page unless the library director has been authorized to sign by the board or equivalent governing body.

Send completed forms by email attachment to:

Cheryl O'Connor, Executive Director
LibraryLinkNJ – The New Jersey Library Cooperative
44 Stelton Road, Suite 330
Piscataway, NJ 08854
732-752-7720
coconnor@librarylinknj.org

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.
## APPLICATION & CERTIFICATION FORM

**LibraryLinkNJ Mobile Pilot Project - FY2012**  
*New Jersey Libraries-On-The-Go*

### APPLICANT:

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<tr>
<th>LIBRARY/INSTITUTION/SCHOOL DISTRICT NAME</th>
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<tr>
<td>ADDRESS</td>
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<tr>
<td></td>
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<tr>
<td>CITY          STATE        ZIP</td>
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**COUNTY – REQUIRED**

### PROJECT DIRECTOR:

________________________________________

### TELEPHONE NUMBER:

(______)_________________________

### FAX#:

(______)_________________________

### E-Mail Address:

________________________________________

### Application Deadline:

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### 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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<th>TYPE NAME AND TITLE</th>
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Filling out Sections 1 – 5 is required.

Fill out Sections 6, 7 and/or 8, as applicable.

1. Project Description: Provide the goal and objectives of how your project will expand, promote and/or evaluate your existing mobile service.

2. Vendor and Product of Choice: Supply the name of your current vendor and product choice(s), where applicable. If project is generated in-house, please describe.

3. Proposed Budget: Submit a basic fund budget and include:
   1. LibraryLinkNJ Subsidy Request
   2. Amount of local funding contribution, if any (this is desirable, but not required):

4. Staff Commitment: Please describe number of project staff and estimate of staff hours.

5. Implementation Timeline: Provide estimated timeline for implementing project.

6. Expansion Plan: Describe how you will expand your project, if applicable.

7. Marketing and/or Public Relations Plan: Describe the marketing strategy and public relations materials you will create, if applicable.

8. Evaluation Plan: Describe how you will evaluate the project results, if applicable.

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