

**LSTA COPYCAT GRANT APPLICATION
CERTIFICATION & SIGNATURE**

Library/Organization:	
Project Title:	

As the duly authorized representative of the applicant public library, I agree that if my project is funded, I will:

- Submit all forms and reports as required by the State Library
- Conduct participant surveys as required by the State Library
- Acknowledge the Institute of Museum and Library Services in all publicity and publications as required

I hereby certify that the library is *(check only one of the following boxes)*

A. An individual applicant that is CIPA compliant.
The applicant library, as a public library, has complied with the requirements of Section 9134(f)(1) of the Library Services and Technology Act.

B. Representing a group of applicants. Those applicants that are subject to CIPA requirements have certified they are CIPA compliant.
All public libraries, public elementary school libraries, and public secondary school libraries, participating in the application have complied with the requirements of Section 9134(f)(1) of the Library Services and Technology Act. The library submitting this application has collected Internet Safety Certifications from all other applicants who are subject to CIPA requirements. The library will keep these certifications on file with other application materials, and if awarded funds, with other project records.

C. Not Subject to CIPA Requirements.
The CIPA requirements do not apply because no funds made available under this LSTA grant will be used to purchase computers that can access the Internet or to pay for direct costs associated with accessing the Internet.

I have read and support this LSTA Grant Application.

Library Director Name:	Title:		
Library Director Signature:		Date:	