

2021 Archives Development Grant



Tre Hargett
Secretary of State

Tennessee State Library and Archives
Department of State
State of Tennessee
1001 Rep. John Lewis Way North
Nashville, TN 37219

Direct Grants to Local Government Archives Application Procedures and Documentation

The Tennessee State Library and Archives is pleased to provide a grant opportunity to local archives across Tennessee for their archival needs. This grant is wholly provided by the Tennessee Secretary of State.

The 2021-2022 Archives Development Grant is available for local archives to replace or purchase archival supplies to improve the storage conditions of archival collections, operations, or public accessibility. Grant funds are available for the following:

- archival shelving units
- acid-free, lignin free folders and boxes
- other necessary archival supplies or environmental monitoring devices
- contracted conservation treatments
- hiring part-time worker
- improving on-line access to collections through digitization
- registration fees for webinars from approved organizations

In fiscal year 2022, grants are available for up to \$5,000 for improvements to local archives. We appreciate Secretary of State Tre Hargett's continued commitment to the Archives Development Grant Program.

The grant contract will **begin on October 1, 2021 and end on May 31, 2022**. Please be aware that no grant payments will be processed until the contract is in place.

Applications can be sent via e-mail or mail, as we do not require original signatures to be submitted. Please send all applications to the following:

Sara Baxter
Archives Development Program
Tennessee State Library and Archives
1001 Rep. John Lewis Way North
Nashville, TN 37219
Ph: 615-741-2083
sara.baxter@tn.gov

Deadline for applications is close of business **September 3, 2021**.



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Legal Archive Name			
Grantee Mailing Address			
City		State	Zip Code
Phone Number			
County Archivist			
County Archivist Contact Information <i>(phone and email)</i>			
County Executive <i>(will be required to sign the contract)</i>			
County Executive Mailing Address			
County Executive Contact Information <i>(phone and email)</i>			
Fiscal Contact Name			
Fiscal Contact Information <i>(phone and email)</i>			
Title VI Contact Name			
Title VI Contact Information <i>(phone and email)</i>			
State House District to be Served (http://capwiz.com/nra/dbq/officials/)			
State Senate District to be Served (http://capwiz.com/nra/dbq/officials/)			
Full Name of the Entity that is registered for the FEIN number listed below			
FEIN (Federal Employer Identification) Number*			
Edison ID Number**			

*a nine-digit number assigned by the IRS

**Edison is the system used by State Fiscal. Your Edison ID is assigned by the State. It can be a two to six-digit number. Every grant applicant is required to have an Edison ID and it is tied to your FEIN. If you do not have one assigned to you, reach out to grant manager to begin setup process.





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Names of members of the public records commission:	Chairperson: <ul style="list-style-type: none">•••••••
The archivist reports to (county/city/town officer)	
Date archives established	
Is there an archives fee? How much?	Yes No \$
Scheduled days and hours of operation	
Scheduled hours open to the public	
Date span of archives (years of oldest and newest records)	





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Briefly describe the principal kinds of county (or city) records and their approximate volume in cubic feet (linear shelf feet)¹ that your archive keeps and makes available to the public:

Record Group or Series	Volume in Cubic Feet
[e.g.: Loose chancery court records, 1835-1900]	[20.0]

¹ A rough approximation is acceptable. Precise measurement is not required.





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Financial Certification

Organization Name: _____

Federal Employer Identification Number
(FEIN) _____

Also referred to as a tax-exempt number

Business Name or Name of the Holder of
the FEIN _____

In order for grant funds direct deposited, please provide the last 4 digits of the account you will be using for this grant

Note: *if using a new account for direct deposit, please contact the grant manager for the documentation and instructions to add this account to your file with the State.*

Signature of Authorizing/Fiscal Authority

Date

**This should be whomever will be approving/placing your orders, managing the funds, and compiling the reimbursement paperwork.*

Printed Name and Title of Signatory

Email and Phone of Signatory

Note: if you *cannot* receive your reimbursement as a direct deposit, please note that on this form and include the address where a check would need to be sent.





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Certifications

To help streamline our grant process and provide as much information as possible up front, we ask that you certify that the applicant is compliant with and understands the following:

		Please check one	
		Yes	No
1.	Title VI, Civil Rights Act of 1964		
2.	Applicant has either attended the virtual grant workshop or watched the recording (available here) and has made themselves familiar with all grant documentation, including accounting, project management, and reporting, provided by the TSLA Archives Development staff		
3.	This Archives is a Department of the County or City and is the official records repository		

Signature of Project Director

Date

Signature of Authorizing Authority

Date

Printed Name and Title Authorizing Authority

Please note: Authorizing Authority refers to someone that has fiscal authority. This can include the board chair, mayor, city, or county financial officer, etc.

Ineligible Items

Items not eligible for direct purchase through this grant include (but may not be limited to):

- Refurbished equipment (desktops and laptops included)
- Salaries
- Construction or Capital Improvements
- Network cabling
- Device stands
- Security systems
- Phones or phone charges
- Hotspots
- Non-digital microfilm readers or reader/printers
- Database subscriptions
- Items costing \$5,000 or more
- Taxes/Sales tax
- Utilities
- Basic office supplies
- Furniture
- Subscription services or licensing fees that fall outside the grant period

Note: If you are not sure if the item you are interested in is eligible, please feel free to ask.

Note: Televisions are eligible, however, a detailed explanation on how it will be used and where is required. This can be provided on an additional page.





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Archival Supplies

In support of the grant application and contract, grantees are required to provide budget information on how the funds, if granted, are to be spent. **Grantees are accountable to the Tennessee State Library and Archives for the expenditure of the budgeted funds for the objects identified in the budget. Any changes the grantee wishes to make that require the expenditure of the granted funds on any object, item, or service other than those declared in this budget must receive the prior written approval of the Tennessee State Librarian and Archivist or his designated representative.**

Name of County or City: _____

In your request, please feel free to include links to the item(s) that will help us understand what you are requesting and an explanation of use. Please duplicate this page if you need more spaces.

Item Description	Cost per Item	# Requested	Total

Explanation of use, including link to the item.

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Item Description	Cost per Item	# Requested	Total

Explanation of use, including link to the item.

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Item Description	Cost per Item	# Requested	Total

Explanation of use, including link to the item.

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Item Description	Cost per Item	# Requested	Total

Explanation of use, including link to the item.

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Total for Category	\$
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Training/Webinars

All training must be pre-approved and must be completed within the grant period's start/end dates. Grantees will be responsible for securing and paying for all registrations in advance of reimbursement.

Training Request

Title of training program or class	
Name of organization presenting the training	
Subject/Topic of training	
Method of delivery (online or in person)	
Date(s) of Training	
Registration cost per person	
Number of registrations	
Justification for attendance	
Cost of training #1	





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Outside Contracted Services

Vendor Name (Attach a quote to your application)	Cost
<i>*Note: Services can only take place during the grant period of Oct. 1, 2021 - May 31, 2022</i>	

Explanation of project (what do you want this contractor to do?)

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Outcome of project (where will the scans be hosted, stored, accessible, etc.)

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Total for Category	\$
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Contract/Part-Time Archivist

If you wish to hire a contract/part-time archivist, please note the following:

- This person cannot already be employed by or paid by your organization. This cannot be supplemental to an existing salary or hourly employee.
- The duration of the contracted work can only be the grant period (Oct. 1, 2021 - May 31, 2022).
- Please attach a basic plan of work including an anticipated hire date, number of hours to be worked, and hourly rate to this application.

Position with start date	Hourly Rate or Contract Payment Amount	Time (Number of Hours or Length of Contract)	Total

Total for Category	\$
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Summary Page

Total request for Archival Supplies	
Total request for Training	
Total request for Outside Contract Services	
Total request for Contract Archivist	
Total Request for Grant Application	

As authorizing official of the applicant, I certify to the best of my knowledge that the information in this application is true and correct. The application has been duly authorized by the governing body of the applicant, and, if funded, the applicant will carry out the project in the manner described herein. I further certify that the applicant will maintain records in accordance with the generally accepted government accounting principles, and that the funds awarded will be included in those audits or financial statements covering all or part of the project duration period.

Signature of Authorizing Official

Date

As the project archivist/manager, I certify that I have attended the virtual grant workshop or watched the recording (available [here](#)) and am in full understanding of all project requirements, including accounting, project management, and reporting.

Signature of Project Archivist/Manager

Date





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CHECKLIST OF SUPPORTING MATERIALS

Applicants must submit ***all*** the following *together in **one** package*:

- ☐ Completely-filled-out application form
a current and functioning email address for the archivist is required
- ☐ Completely-filled-out budget for expenditure of funds if granted
- ☐ Copy of the budget allocated to the archives by the county (or city) government for the past year; **OR** a letter from the county (or city) executive certifying a fair estimate of the funds expended to support the archives by the county (or city) or from any other source in the past year
- ☐ One-page explanatory narrative of what the grant is to be used for and why the grant is needed
- ☐ One-page letter from the county (or city) executive or other official primarily responsible for overseeing the archives on behalf of the county commissioners (or city councilors) explaining how the local archives program satisfies guidelines for archives laid down in Tennessee Archives Management Advisory: *Basic Archives Management Guidelines for Local Archives*

Signed: _____

County/City Archivist





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Important Dates

Date	Activity
August 1, 2021	Application available
August 3, 2021	Informational webinar with Q&A session will take place via Zoom
September 3, 2021	Application deadline; Applications due by 4 pm (CST)
October 1, 2021	ADP Direct grant awards announced on or around this date
February 18, 2022	Interim reports due by 4 pm (CST)
May 31, 2022	ADP Direct grant projects completed; spending of funds complete
June 1, 2022	Report outstanding reimbursement amounts to grant manager
June 15, 2022	Final day to submit reimbursement requests
June 30, 2022	Final reports due by 4 pm (CST) on or before June 30, 2022

