Northern Indiana Computer Consortium of Libraries

Grant Guidelines

From the NICCL Interlocal Agreement:

WHEREAS, it is to the advantage of Indiana Library Districts participating in this Interlocal Agreement (hereinafter referred to as “Library Members”) to join together to explore new and emerging technologies, seek out best technology practices, obtain training, negotiate pricing of technology hardware and software purchases and technology support services for the benefit of Library Members, and otherwise cooperate in the sharing of knowledge, data and information which will be to the mutual benefit of the Library Members.

Grant Descriptions

In order to further the mission of NICCL in the support of professional development and technology innovation, the organization shall award two grants per year - one in the spring for Professional Development and one in the fall for Technology Improvement. Each grant will be for $500.

- A Professional Development Grant will be awarded for a workshop or other training in technology. It can be used for registration fees, travel, or materials needed, (i.e. books, printing).

- A Technology Improvement Grant will be awarded to provide hardware, software or other tangible item which will improve the member library’s technology infrastructure.

Who may apply

Any member of NICCL may apply for a grant, using the approved Grant Request Application form. All Member Libraries who are current in their dues are eligible to apply, however, priority will be given to Library Members who have not received a grant from NICCL within the past two calendar years.

Reporting

The recipient of the Professional Development Grant shall be required to give a presentation at the NICCL Member’s meeting on the topic and activity they participated in, including the value of the training, its impact on the recipient’s knowledge of the topic, and how the knowledge will be applied.

The recipient of the Technology Improvement Grant shall be required to give a presentation at a NICCL Roundtable meeting on the item purchased and the value it will provide to the library’s technology infrastructure.

Award notification

Member Libraries who apply for a grant will be notified of the award when the decision is made.

For more information

Grant Applications are available on the NICCL’s website: https://www.niccl.org.
Northern Indiana Computer Consortium of Libraries

Professional Development Grant Application

Name of Library____________________________________
NICCL designated representative____________________________
Name of Applicant(s)____________________________________________________________
Email address_____________________________________
Position or Job Title___________________________________________
Activity (workshop, conference) _________________________________
Organization providing the training ______________________________
Date of event______________________
How will this training benefit you or your library?

NICCL believes in the cooperation of its members to share knowledge, data, and information, which will be to their mutual benefit.

By signing this application, the Library Member agrees to abide by the NICCL Professional Development Grant guidelines, and certifies that they will complete the professional development activity indicated on this form. Furthermore, the Member Library will ensure that the recipient of this grant will give a presentation on the training received at the NICCL Member’s meeting, as outlined in the Grant Guidelines.

__________________________________________________            ____________
Signature of Applicant                                                                               Date

__________________________________________________            _____________
Signature of NICCL designated representative (if different)         Date
Northern Indiana Computer Consortium of Libraries
Technology Improvement Grant Application

Name of Library____________________________________

NICCL designated representative____________________________________

Name of Applicant ____________________________________________________________

Email address_____________________________________

Position or Job Title___________________________________________

Item to be purchased _________________________________

Cost ______________________________

What is the purpose of the item?

How will it benefit your library?

NICCL believes in the cooperation of its members to share knowledge, data, and information, which will be to their mutual benefit.

By signing this application, the Library Member agrees to abide by the NICCL Technology Improvement Grant guidelines, and certifies that they will purchase the item indicated on this form. Furthermore, the Member Library will ensure that the applicant will give a presentation on the item purchased, as outlined in the Grant Guidelines.

__________________________________________________            ____________
Signature of Applicant                                                                               Date

__________________________________________________            _____________
Signature of NICCL designated representative (if different)                     Date