**CALIFORNIA STATE LIBRARY**

**LIBRARY SERVICES AND TECHNOLOGY ACT (LSTA)**

**CONTENT ACTIVITY REPORT FORM**

**(Attach this form to the Final Program Narrative Report after it is completed)**

|  |  |  |  |  |
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| **Grant Information** | | | | |
| 1. Orgnaization: | | |  | |
| 2. Project Title: | |  | | |
| 3. Award Number: | | | | 40- |
| 4. Fiscal Year: |  | | | |

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| **Activity Information** | | | | | | | | |
| 1. Activity Title: | | |  | | | | | |
| 2. Brief Activity Abstract: | | | | | | | | |
| 3. Delivery Format: | | | | | | | | |
|  |  | Digital | |  | Physical |  | Combined Digital and Physical | |
| 4. Acquisition: If you chose Acquisition as the content activity mode, enter the quantity information below. | | | | | | | | |
| Number of hardware acquired | | | | | | | | 0 |
| Number of software acquired | | | | | | | | 0 |
| Number of licensed databases acquired | | | | | | | | 0 |
| Number of print materials (books & government documents) acquired | | | | | | | | 0 |
| Number of electronic materials acquired | | | | | | | | 0 |
| Number of audio/visual units (audio discs, talking books, other recordings) acquired | | | | | | | | 0 |
|  | | | | | | | |  |
| 5. Creation: If you chose Creation as the content activity mode, enter the quantity information below. | | | | | | | | |
| Number of items digitized | | | | | | | | 0 |
| Number of items digitized and available to the public | | | | | | | | 0 |
| Number of physical items | | | | | | | | 0 |
| Number of open-source applications/software/systems | | | | | | | | 0 |
| Number of proprietary applications/software/systems | | | | | | | | 0 |
| Number of learning resources 9e.g. toolkits, guides) | | | | | | | | 0 |
| Number of plans/timeframes | | | | | | | | 0 |
|  | | | | | | | |  |
| 6. Preservation: If you chose Preservation as the content activity mode, enter the quantity information below. | | | | | | | | |
| Number of items conserved, relocated to protective storage, re-housed, or for which other preservation-appropriate physical action was taken | | | | | | | | 0 |
| Number of items reformatted, migrated, or for which other digital preservation-appropriate action was taken | | | | | | | | 0 |
| Number of preservation plans/frameworks produced/updated (i.e. preservation readiness plans, data management plans) | | | | | | | | 0 |
|  | | | | | | | | |
| 7. Description: If you chose Description as the content activity mode, enter the quantity information below. | | | | | | | | |
| Number of items made discoverable to the public | | | | | | | | 0 |
| Number of collections made discoverable to the public | | | | | | | | 0 |
| Number of metadata plans/frameworks produced/updated | | | | | | | | 0 |
|  | | | | | | | | |
| 8. Lending: If you chose Lending as the content activity mode, enter the quantity information below. | | | | | | | | |
| Total number of items circulated | | | | | | | | 0 |
| Average number of items circulated / month | | | | | | | | 0 |
| Total number of ILL transactions | | | | | | | | 0 |
| Average number of ILL transactions / month | | | | | | | | 0 |
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| 9. Other: If you chose Other as the content activity mode, please describe the mode. | | | | | | | | |

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| **Partner Information** | | | |
| 1. Please identify the area(s) in which your partner organization(s) operates. | | | |
|  | Libraries |  | Preschools |
|  | Historical Societies or Organizations |  | Schools |
|  | Museums |  | Adult Education |
|  | Archives |  | Human Service organizations |
|  | Cultural Heritage Organization Multi-type |  | Other |
| 2. Please identify the legal type of the partner organization(s) for this project. | | | |
|  | Federal Government |  | Non-Profit |
|  | State Government |  | Private Sector |
|  | Local Government (excluding school districts) |  | Tribe/Native Hawaiian Organization |
|  | School District |  |  |

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| **Beneficiaries** | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Is the activity directed at the library workforce (includes volunteers and trustees)? | | | | | | | | | | | | | | | | | | | | | | | |
|  | Yes *(If you check this box skip questions #2 - #11 and go to the Locale section)* | | | | | | | | | | | | | | | | | | | | | | |
|  | No *(If you check this box go to the next question)* | | | | | | | | | | | | | | | | | | | | | | |
| 2. Is the activity for a targeted group or for the general population? | | | | | | | | | | | | | | | | | | | | | | | |
|  | Targeted group *(If you check this box answer questions #3 - #11 below)* | | | | | | | | | | | | | | | | | | | | | | |
|  | General population *(If you check this box answer #3 below, skip questions #4-#11, and go to the Locale section)* | | | | | | | | | | | | | | | | | | | | | | |
| 3. Which best describes the geographic community of the targeted group? | | | | | | | | | | | | | | | | | | | | | | | |
|  | Urban | | | |  | | Suburban | | |  | | | Rural | | | | | | | | | | |
| 4. Select one or more of the following activity target age groups. | | | | | | | | | | | | | | | | | | | | | | | |
|  | All ages | | |  | | | | 6-12 years | | |  | | | 18-25 years | | |  | 50-59 years | | | |  | 70+ years |
|  | 0-5 years | | |  | | | | 13-17 years | | |  | | | 26-49 years | | |  | 60-69 years | | | |  |  |
| 5. If the activity is directed at those in one or more of the following economic situations, select one or more. | | | | | | | | | | | | | | | | | | | | | | | |
|  | People who are living below the poverty line | | | | | | | | | | | | | |  | Unemployed | | | |  | Not applicable | | |
| 6. If the activity is directed at ethnic or minority populations, select one or more. | | | | | | | | | | | | | | | | | | | | | | | |
|  | American Indian or Alaska Native | | | | | | | |  | | | Black or African American | | | | | | | Native Hawaiian/Pacific Islander | | | | |
|  | Asian | | | | | | | |  | | | Hispanic or Latino | | | | | | | Not applicable | | | | |
| 7. Is the activity directed at families? | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Yes |  | | | No | | | | | | | | | | | | | | | | | |
| 8. Is the activity directed at intergenerational groups (does not include families)? | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Yes |  | | | No | | | | | | | | | | | | | | | | | |
| 9. Is the activity directed at immigrants/refugees? | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Yes |  | | | No | | | | | | | | | | | | | | | | | |
| 10. Is the activity directed at those with disabilities? | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Yes |  | | | No | | | | | | | | | | | | | | | | | |
| 11. Is the activity directed at limited functional literacy or information skills? | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Yes |  | | | No | | | | | | | | | | | | | | | | | |
| 12. Is the activity directed at groups that fall into a category not already captured? | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Yes |  | | | No | | | | | | | | | | | | | | | | | |

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| **Locale** | |
| 1. Is the activity statewide? | |
|  | Yes *(If you check this box skip question #2 and go to the Institution Types section)* |
|  | No (if you check this box answer question #2) |
| 2. Can you identify specific institutions? | |
|  | Yes *(If you check this box go to the Institutions section)* |
|  | No *(If you check this box go skip the Institutions section and go to the Institution Type section)* |

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| **Institutions** (enter specific institutions) | | | | | | |
| 1. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 2. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 3. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 4. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 5. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 6. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 7. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 8. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 9. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |
| 10. | Name: |  | Address: |  | | |
|  | City: |  | State: |  | Zip: |  |

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| **Institution Types** | |
| 1. For each type of institution enter the number of locations. | |
| 0 | Public Libraries |
| 0 | Academic Libraries |
| 0 | State Library |
| 0 | Consortia |
| 0 | Special Libraries |
| 0 | School Libraries |
| 0 | Other |

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| **Activity Outcomes** (If you chose acquisition or creation as the content activity mode and the activity was directed at the library workforce, complete this section) | | | | | | |
| SD = Number of respondents that reported “Strongly Disagree”  D = Number of respondents that reported “Disagree”  NA/ND = Number of respondents that reported “Neither Agree nor Disagree”  A = Number of respondents that reported “Agree”  SA = Number of respondents that reported “Strongly Agree”  NR = Number of respondents that did not answer the question | | | | | | |
| 1. Total Number of survey responses: | | 0 | | | | |
| 2. I am satisfied that the resource is meeting library needs. | | | | | | |
| SD  0 | D  0 | | NA/ND  0 | A  0 | SA  0 | NR  0 |
| 3. Applying the resource will help improve library services to the public. | | | | | | |
| SD  0 | D  0 | | NA/ND  0 | A  0 | SA  0 | NR  0 |