**APPLICATION CERTIFICATION**

*This form is to be completed by the applicant organization’s authorized representative.*

I have read and support this LSTA Grant Application.

Please note: If your application is successful, project funds may take up to 6-8 weeks to arrive after your claim form is received by the State Library. With the submission of your application, you acknowledge that you are aware of this timeline and confirm that you will be able to start and continue your project, as needed, before grant funds arrive.

**CONTACT INFORMATION**

|  |  |
| --- | --- |
| **Library/Organization** |       |
| **Project Name** |       |
| **Authorized Representative Name** |       |
| **Title** |       |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Authorized Representative Signature Date**

*Please print this certification form and sign in blue ink.*

*Scan the signed certification form and attach it to the online*

*application (see instructions for more information).*