



Massachusetts Health Sciences Library Network

Jay Daly Information Technology Grant Program Application

Name: _____ Job Title: _____

Library: _____ Organization: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Date MAHSLIN membership dues last paid: _____

(Only current MAHSLIN members are eligible for grant funds.)

I am applying for a grant of \$_____ to be used for (please check one):

A. Attendance at the following *technology-related* program or course:

(Application **must** be received six weeks prior to program/course date.)

Program/Course Title: _____

Location: _____ Date(s): _____

Cost: \$ _____

Describe in detail how the information received from this program/course will benefit library services/patrons:

B. Purchase of the following *emerging* technology hardware/software:

(Technology **must** be purchased and installed within twelve months of receipt of grant funds.)

Cost: \$ _____

Anticipated purchase/installation date: _____

Describe in detail how the use of this technology will benefit library services/patrons:

Recipients must present a poster at the annual MAHSLIN meeting within two years of receipt of award and write an article for the MAHSLIN newsletter within one year of receipt of award demonstrating how their use of grant funds benefited one or more of the following: the individual, the individual's institution, MAHSLIN, the profession.

Signature: _____ Date: _____

Please send this completed application to the current MAHSLIN President.

(Go to <http://www.mahslin.org/> for contact information of the current President.)