# **Collection Equity Award Funding Application**

*For assistance, please contact the NNLM Region 5 office at**nnlm@uw.edu*

**Project Title:** Collection Equity Award

**Proposed Start and End Dates for the Project:** December 17, 2021 – April 30, 2022.

# Applicant Information

1. NNLM ID:

2. Project Lead First Name:

3. Project Lead Last Name:

4. Project Lead Position Title:

5. Name of Project Organization [institution that will receive funding & lead proposed project]

6. Street Address:

7. City:

8. State:

9. Zip Code:

10. Phone:

11. Project Lead’s Primary Email Address:

12. Institution Tax ID:

**Please tell us what you would plan to do with a Collection Equity Award. Provide a short description that summarizes your plans and goals for this award. (Maximum 350 words)**

**Targeted Populations**This award supports the mission of NNLM to help its members support the health information needs in their communities particularly among underrepresented or marginalized groups. Please list the traditionally underrepresented populations and/or marginalized groups that your award is designed to support.

Please check the box next to each population you intend to target your outreach to.

**Demographics**

[ ]  Adults

[ ]  Children

[ ]  Men

[ ]  Seniors

[ ]  Teens

[ ]  Women

**Geographic Type**

[ ]  International

[ ]  Medically Underserved Areas/Populations

[ ]  Rural

[ ]  Suburban

[ ]  Urban

**Issues and Interests**

[ ]  All of Us

[ ]  Behavioral/Social Determinants of Health

[ ]  HIV/AIDS

[ ]  LGBTQ

[ ]  Maternal Health

[ ]  NIH Helping to End Addiction Long-term (HEAL) Initiative

[ ]  Opioids

[ ]  Vaping

**Race and Ethnicity**

[ ]  African Americans or Black

[ ]  Alaska Natives

[ ]  American Indian

[ ]  Asian

[ ]  Latino or Hispanic

[ ]  Native Hawaiians

[ ]  Pacific Islanders

**Explanation of Need:**

**Provide a statement of how the Collection Equity Award will support the mission of NNLM, by explaining the need for the award. When possible, support the stated need using data such as known needs assessments or statistics. (Maximum 400 words)**

**Please tell us how you will measure the success of a Collection Equity Award? (Maximum 100 words)**

**Publicity/Promotion**

**Briefly describe how you intend to promote your Collection Equity Award to your target population(s).  (Maximum 100 words)**

**Participant Roles for the Collection Equity Award**[The participants for which the project will be conducted. Include staff conducting the award and groups the award is intended to reach. Select all that apply.]

[ ]  Community based organization staff

[ ]  Data resource or tool developer

[ ]  Data scientist

[ ]  Educator, college & post-grad

[ ]  Educator, K-12

[ ]  Emergency preparedness and response

[ ]  General public

[ ]  Health care provider

[ ]  Historian

[ ]  Journalist

[ ]  Library or information professional

[ ]  Public health professional

[ ]  Publisher

[ ]  Researcher

[ ]  Student, college & post-grad

[ ]  Student, K-12

# Reporting Requirements and Acknowledgements

Please check the box next to each statement to indicate your agreement if you receive a funding award

[ ]  You agree to comply with the reporting requirements for this award, which is: To help further the reach of this award, the awardee is required and agrees to submit a bibliography of the resources purchased as the Final Project Report. The citation format will be provided to awardees.

[ ]  Any web-based resources developed for this project will ensure accessibility to the greatest possible number of people \*