PARTNERSHIP STATEMENT

Complete one of these forms for each formal partner.	
Legal name of applicant organization (5a from Face Sheet)	
 Legal name of <u>partner</u> organization: Partner DUNS number: Mailing address 	
Street1:	Street2:
City:	State: Zip+4:
4. Partner Web address: <u>http://</u>	
5. Partner project contact name:	
Title:	
Telephone number:	E-mail:
6. Governing control of partner (choose one):	
 State Government County Government City or Township Government Special District Government Regional Organization U.S. Territory or Possession Independent School District Public/State-Controlled Institution of Higher Education Indian/Native American Tribal Government (Federally Recognized) Indian/Native American Tribal Government (Other than Federally Recognized) Indian/Native American Tribal Government (Other than Federally Recognized) Indian/Native American Tribal Government (Other than Federally Recognized) 	 Nonprofit with 501(c)3 IRS Status (Other than Institution of Higher Education) Nonprofit without 501(c)3 IRS Status (Other than Institution of Higher Education) Private Institution of Higher Education Individual For-Profit Organization (Other than Small Business) Small Business Hispanic-serving Institution Historically Black Colleges and Universities (HBCUs) Tribally Controlled Colleges and Universities (TCCUs) Alaska Native and Native Hawaiian Serving Institutions Nondomestic (non-U.S.) Entity Other (specify)

7. What is the partner organization's mission? [500 characters]

8. Describe the partner organization's service area (audience served, including size, demographic characteristics, and geographic area). [500 characters]

9. List the partner's key roles and responsibilities in the project. [1000 characters]

Please note:

- A. Submission of this application by the authorized representative of the applicant organization reflects the partner organization's agreement with the following statements:
 - We will carry out the activities described above and in the application narrative.
 - We will use any federal funds we receive from the applicant organization in accordance with applicable federal laws and regulations as set forth in the program guidelines and the terms and conditions of the grant award.
 - We assure that our facilities and programs comply with the applicable federal requirements and laws as set forth in the program guidelines.
- B. Prior to submission of the application, the applicant will ensure that the partner organization has provided to the applicant a signed original of this Partnership Statement for the applicant's records. Such original will be made available to IMLS, if requested by IMLS.

OMB No. 3137-xxxx, expires 00/00/00

Burden Estimate and Request for Public Comments: Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comment regarding this burdenestimate or any other aspect of this collection of information, including suggestion for reducing this burden, to the Institute of Museum and Library Services, Chief, Information Officer, 1800 M Street, NW, 9th Floor, Washington, DC 20036-5802, and to the Office of Management and Budget, Paperwork Reduction Project (3137-xxxx), Washington, DC 20503.