## CIRCUIT COURT PRESERVATION PROGRAM

**DIGITAL MICROFILM READER/SCANNER**

**GRANT CYCLE FY2019**

|  |  |  |
| --- | --- | --- |
| Name of Locality | | |
| Name of applicant | Position Title | Phone Number |
|
| Name of Primary Project Contact (if different from applicant) | Position Title | Phone Number |
|
| E-mail – Primary Project Contact | Fax Number |  |
|
| Physical Address (Street, City, State, Zip Code) | Mailing Address - if different (Street, City, State, Zip Code) | |
| Signature of Circuit Court Clerk | Date | |
| **To Be Completed by Circuit Court Records Preservation Program Staff Only** | | |
| Application Received | Grant Awarded  Date  Grant Denied  Date | |
| Name Date | Notification Mailed  Date | |

## DIGITAL MICROFILM READER/SCANNER – PROJECT

## DESCRIPTION AND REQUIREMENTS

Microfilm reader/scanners purchased through the grants program will be 35mm compatible. Contact your Consulting Archivist for details on procurement of this equipment and for specifications on the most appropriate unit to meet the office’s needs. Only localities with microfilm on hand or in production should apply. Vendor reader/scanner specifications and costs, including any costs for delivery, installation and training, must be included with grant application as a support document. The maintenance cost for the first year may be included in the solicitation and covered by grant funds. Maintenance and repair costs after the first year are the responsibility of the clerk and/or locality.

## DIGITAL MICROFILM READER/SCANNER – GRANT REQUEST FORM

**To Be Completed by Circuit Court Clerk or designated staff**

Enter the following: name of vendor and estimated project cost.

**Name of vendor**  -

|  |  |
| --- | --- |
| Digital reader/scanner | Estimated project cost |
|  |  |

1. Do you currently have records on microfilm?  Yes  No

2. If yes, how many reels of film do you currently have?

3. What size microfilm do you have?  35 mm  16 mm

4. How often is the microfilm used?

Daily  Weekly  Monthly  Rarely

5. Describe the benefits of this project.

6. What previous actions have you taken to improve the preservation and management of records in your custody?

7. Once the project is complete, what future actions will you take to ensure the long-term preservation of the records in your custody?

**Be sure to attach the following with application:** Vendor reader/scanner specifications and costs, including any costs for delivery, installation and training, must be included as a support document. The maintenance cost for the first year may be included in the solicitation and covered by grant funds. Maintenance and repair costs after the first year are the responsibility of the clerk and/or locality.