

Partnership Form

DLIS Florida American Rescue Plan Act Grant

A Partnership Form should be completed between the applicant organization and partner organization (beneficiary).

Applicant Organization Name: _____

Partner Organization Name: _____

Project Name: _____

The undersigned applicant organization agrees to provide the following programs, services or activities on behalf of the partner organization:

[Specify library programs, services or activities.]

The organizations further agree to each of the following:

- The partner organization requests the applicant organization to submit an American Rescue Plan Act application on the former's behalf.
- Funds must be received, expended and administered by the applicant organization. Grant funds cannot be distributed to the partner organization for expenditure.
- The applicant organization is allowed, if desired, to charge an indirect cost (administrative fee) for the project. The indirect cost must be either a current indirect cost rate already negotiated with a federal agency, or a rate not to exceed 10% of the total direct costs.
- The applicant organization will manage and implement the project, and any project revisions, as presented in the project application.
- Funds or services received will be used in accordance with the application and any applicable laws and regulations.
- Services provided as a result of the project will be at no charge and will be readily available to the target population.

Signature of Authorized Applicant Official

Signature of Authorized Partner Official

Name of Authorized Applicant Official
(print or type)

Name of Authorized Partner Official
(print or type)

Title of Authorized Applicant Official

Title of Authorized Partner Official

Date

Date