

Kentucky Oral History Commission
Preservation Assistance Grant Application, FY2020
Deadline: Ongoing

Guidelines

Preservation assistance grants are non-cash grants that loan audio preservation equipment and provide training to applicants in need of digitally migrating collections whose subject matter is considered a priority research topic by the Commission or whose media is in threat of information loss or in a state of deterioration.

Eligibility Requirements – Any organization with oral history interviews in its archival collection may apply. Applicants may include, but are not limited to, county historical societies, libraries, and universities. Applicants must not have outstanding final reports or delinquent interviews funded through the Kentucky Oral History Commission or other Kentucky Historical Society program.

Grant Award – Successful applicants receive:

- A complete, mobile digital workstation.
- Training and supervision by a member of the Commission’s staff or other professional assigned by the Commission. The degree of training and supervision will depend on the individual applicant’s needs.

Grant Cycle Timeline

| | |
|--------------------------------|---|
| Application deadline | Ongoing |
| Award notification | Within 60 days of submitting the application |
| Interim Report Due | Six months after receipt of equipment and training |
| Request for extension deadline | Nov. 1, 2020 or April 1, 2021 |
| Project must conclude | Twelve months after receipt of equipment and training |
| Final report and equipment due | 30 days after completion |

To Apply – Applications may be submitted at any time and are subject to approval of the Kentucky Oral History Commission staff. The applicant is required to provide the Commission with the original, unstapled grant application signed in red ink.

Crediting the Kentucky Oral History Commission and the Kentucky Historical Society – Grant recipients must give credit to the Commission and the KHS in all published materials (print and electronic) that result from KOHC funded oral history projects including exhibits, web sites, advertising promotions, news releases, printed programs, catalogues, flyers, posters, literature, film/video credits, public broadcasts, and other publicity. Repositories housing KOHC funded collections must credit the Commission as funder in catalogues, OHMS finding aids and other public access platforms. Contact KOHC staff for appropriate logos or wording of credits. It is important that the public be made aware of the use of tax dollars for oral history documentation. Failure to comply with this requirement could jeopardize future funding.



Kentucky Oral History Commission • 100 W. Broadway • Frankfort, KY 40601
 502-564-1792, ext. 4434 • history.ky.gov • email: sarahm.schmitt@ky.gov

The Kentucky Historical Society administers and houses KOHC, the only commission of its kind in the United States dedicated to providing financial and technical assistance to oral history repositories and oral historians, KOHC has positioned Kentucky historical organizations, libraries and archives to lead the way in collecting and preserving oral histories.

Complete this form and submit a signed copy as the cover sheet for your entire application.

Grant# _____

| | | | |
|---|--|-------------------|--|
| Oral History Collection: | | | |
| Collection Description (50 – 100 words): | | | |
| Project Begin Date: | | Project End Date: | |
| Project Director/Title: | | | |
| Address: | | | |
| City/State/Zip: | | | |
| Telephone: | | Email: | |

| | | | |
|-----------------|--|--------|--|
| Organization: | | | |
| Address: | | | |
| City/State/Zip: | | | |
| Telephone: | | Email: | |
| County: | | | |

| | | | |
|--|--|--|--|
| Repository (if different from the organization): | | | |
| Number of Interviews to be Preserved: | | | |

*I certify that I am legally authorized to submit this report on behalf of the grantee and that the foregoing statements and enclosures are true and complete to the best of my knowledge. Sign in **red ink**.*

| | | | |
|------------------------|--|--------|--|
| Project Director: | | Date: | |
| Organization Official: | | Title: | |

Performance Expectations

Commission staff review applications according to these criteria (Maximum 2 pages):

1. **Historical Value or Cultural Significance**
 - Describe the collection's purpose, including the specific geographic areas and topics covered.
 - Describe the significance of the interview(s) to Kentucky history and/or culture. How will preserving these recordings contribute to the existing historical knowledge of the topic?
2. **Condition of the interview(s)**
 - Provide a list of collection interviews including interviewee names, interview length, audible quality, access restrictions, preservation concerns, and other relevant data.
3. **Implementation and Quality**
 - Describe the project staff's experience and time commitment to migrating interviews. Attach resumes and CVs as supporting material. **Experience is not a pre-requisite of this grant, but including these details will help determine the level of training required.**
 - Describe the digital preservation storage and preservation plan for the newly created media.
4. **Anticipated Accessibility of Finished Project**
 - Explain how the interviews will be made accessible, including anticipated publication, exhibit, or other form of presentation based on the completed interviews.

Attach a one-page resume or CV for the director, staff, and advisors.

Letters of support are encouraged (maximum of four).

For technical assistance or answers to project-related questions, applicants are encouraged to contact Oral History Administrator Sarah M. Schmitt.



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Kentucky Oral History Commission
Preservation Assistance Grant Interim Report, FY2020
Due: Six months after receipt of equipment and training

Grant # _____

| | |
|--|--|
| Oral History Collection: | |
| Project Director: | |
| Address: | |
| City, State, Zip: | |
| Telephone: | |
| Email: | |
| Organization: | |
| Number of Interviews Completed: | |
| Provide a description of your progress toward fulfilling the activities outlined in your grant proposal. | |
| | |

I certify that I am legally authorized to submit this report on behalf of the grantee and that the foregoing statements and enclosures are true and complete to the best of my knowledge. Sign in red ink.

| | | | |
|-----------------------------|--|-------|--|
| Project Director Signature: | | Date: | |
|-----------------------------|--|-------|--|



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Kentucky Oral History Commission
Preservation Assistance Grant Final Report, FY2020
Deadline: 30 days after completion

Grant # _____

| | | | |
|--|--|---------------------|--|
| Oral History Collection: | | | |
| Project Director: | | | |
| Address: | | | |
| City, State, Zip: | | | |
| Telephone: | | | |
| Email: | | | |
| Organization: | | | |
| Repository: | | Deposited: | |
| Number of Interviews Completed: | | Equipment Returned: | |
| Kentucky Counties Represented in Collection: | | | |
| Total Volunteer or In-Kind Hours: | | | |

Narrative Report

Use a maximum of two pages to respond to the items below and attach to this form in your final report submission. The KOHC may use this report to highlight the accomplishments of the project (i.e., website, blog post or marketing tool), so consider writing this portion in a public voice.

Address:

- Whether your original goals described in your application were completed.
- Interesting points that you and/or your colleagues discovered during the course of the project.
- Special points of interest or collection highlights.

Include any additional evidence of the impact of this project, including photographs, flyers, newspaper clippings, etc.

I certify that I am legally authorized to submit this report on behalf of the grantee and that the foregoing statements and enclosures are true and complete to the best of my knowledge. Sign in red ink.

| | | | |
|--------------------------------|--|-------|--|
| Project Director Signature: | | Date: | |
|--------------------------------|--|-------|--|



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