

## Library Leaders Advocates Team – Become a Powerful Library Leader Advocates Application Form

| General Information:  |
|---|
| Name:   |
| Surname:  |
| Function:   |
| Village/Raion/Municipal/National Public Library:  |
| E-mail:   |
| Tel.:   |
|   |
| Information on Your Library Modernization:  |
| Please indicate if the library you are representing has a strategic plan or modernization plan  |
| Yes   |
| No  |
| If <b>yes</b> , please submit a copy of your library strategic plan or library modernization plan along with the application.   |
| Information on Library Advocacy*:   |
| *ADVOCACY is the actions individuals or organizations undertake to influence decision-making at the local, regional, state, national, and international level that help create a desired policy or funding change in support of public libraries through various techniques (e.g. development and distribution of information materials/video/infographic to community leaders) |
| Have you conducted advocacy work for your library?  |
| Yes   |
| No  |



|                   | e a description of up to 10 sentences of the library advocacy work you have ly the activities, the audiences you targeted, and the impact. |
|-------------------|--|
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|                   |  |
| Statement of Purp | ose:   |
|                   | up to 7-10 sentences what would you be most interested in to learn and acquire skills orary Leaders Advocates Team.                        |
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Please send the application form by email: <a href="mailto:office@novateca.md">office@novateca.md</a> with the subject title "Library Leader Advocates Team"

**THANK YOU!**