New York State Education Department
NEW YORK STATE LIBRARY

Authentication of Annual Negotiations for the New York State Public Library System Services to State Correctional Facility Libraries State Aid Program

Program Year _____

This signed Authentication is evidence of successful negotiation of the annual service agreement between the public library system named below and the New York State correctional facility library/institution named below.

NOTE: One Authentication is required for each NYS Correctional Facility Library served

Name of System:_____

Name of Correctional Facility: _____

_____ *Negotiation included review of written State correctional facility Inter - Library Loan policy and agreement that it will be enforced by correctional facility.*

_____ *Both public library system and State correctional facility signers acknowledge that State correctional facility is responsible for the provision of equitable library service to the incarcerated individuals population.*

Signatures:

_____
Facility Librarian* Date
and

_____
Deputy Superintendent for Programs Date

_____
Public Library System Director Date

_____
PLS Liaison to Correctional Facility Date

*Librarian must hold either a professional or a conditional certificate as per CR 90.14(a)(2) and further explained in CR 90.7. If this regulation is not met, contact Mary Beth Farr at the New York State Library/ Division of Library Development: 518/474-1479 or e-mail marybethfarr@nysed.gov.