

**Technology Plan Update
April 30, 2012**

Library _____
Address _____
City/State/Zip _____

Contact person for this technology plan:

Name _____
Phone _____ Fax _____
Email _____

1. Please check one: _____ This is a new plan. _____ This is an update only.

2. When did you last submit a new technology plan? _____

If you last submitted a new technology plan in 2007 or earlier, please send the State Library **this completed form and a new Technology Plan by April 30, 2012.**

Look at http://www.sos.mo.gov/library/certifications/tech_planning.asp for information on library technology plans.

3. If you submitted your technology plan since 2010, have you made significant changes to your computer network since your submission? Please check one:

_____ Yes, we made significant changes as described in section 4

_____ No, we did not make significant changes

4. If you made significant changes to your technology plan, what changes did you make? For instance, did you install a new computer lab, wireless access point, videoconference system, or automation system in the past year? Did you open or close a branch? Attach other pages as necessary.

Printed name of Library Director

Signature, Library Director

Date

PLEASE SEND BY APRIL 30, 2012 VIA POSTAL MAIL TO:

Missouri State Library
Attn: Technology Consultant
James C. Kirkpatrick State Information Center
600 West Main Street
PO Box 387
Jefferson City, MO 65102

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