

CULTURAL AGENCY PROFILE

This questionnaire is used to gain information about Cultural Agencies that petition the Board of Regents for Certificate of Incorporations for organizations that does not own or hold collections.

PLEASE COMPLETE, SIGN AND RETURN THIS FORM TO:

Office of Cultural Education
New York State Education Department
C/o Sarah Jastremski
10A33 Cultural Education Center
Albany, NY 12230

Phone: (518) 474-5976
Email: charters@nysed.gov

(Please do not fax this form to us)

CULTURAL AGENCY PROFILE

INSTRUCTIONS

Please make sure that all questions to the best of your ability and only check the box if the organization has what is requested. Once completed, please send it with supporting documentation to either the mailing or email address above, or with the certificate of incorporation petition to the New York State Education Department Office of Counsel.

I. GENERAL INFORMATION

1. Complete Corporate Name of Organization: _____

2. Address. (All organizations must have a permanent mailing address. A Post Office Box is acceptable).

P.O. Box or Street: _____

City: _____

State and Zip Code: _____

Telephone number: (____) _____

E-mail address: _____

3. Contact Person. Please supply data for a person to be contacted for further information. Telephone number should be where he/she can be reached during normal business hours.

Name: _____

Telephone: (____) _____

E-mail address: _____

4. Which of the following best characterizes the Cultural Organization? # _____

(01) Aquarium

(02) Archive

(03) Art Center

(04) Botanic Garden, Arboretum or Herbarium

(05) Consortium, Conference or Federation of Cultural Organizations

(06) Friends Group or Support Organization.

(07) Historical Society

(08) Library with Collections

- (09) Nature Center
- (10) Performing Arts Center
- (11) Planetarium
- (12) Zoological Institution or Zoo
- (13) Foundation
- (14) Other type of Cultural Organization:

PLEASE SPECIFY: _____

II. GOVERNING AUTHORITY

1. Does the organization have a legally constituted Board of Trustees?

III. MEMBERSHIP

1. Is the organization a membership organization?

If no, does the organization have a subsidiary which acts as a membership group?

2. If both of the above questions are No, skip to Section IV.
3. In the last three years, has membership increased or decreased?

4. Describe the membership dues structure.

5. Does the organization hold regularly scheduled membership meetings?

Are meetings open to the public?

IV. STAFF AND LEADERSHIP

1. Does your organization have a paid professional staff?
2. Does your organization use the services of any individual who assists by providing advice? (e.g., an official of local government, a college faculty member or employee of a service organization).
3. Does the organization utilize the services of volunteers?
4. Does the organization have a program (formal or informal) for training volunteers?

V. FINANCES

1. Is the organization tax exempt under a provision of the Internal Revenue Service (IRS) code?
2. Does the organization complete a yearly audit?

VI. FACILITIES

1. Does the organization own and/ or rent real property?
2. If yes, please describe the land and/or buildings by type (school, church, historic structure or site, etc.). Give age or date of construction, size, number of rooms, etc. of the structure(s).

3. Is the building or structure accessible to the handicapped (for example, to a person in a wheelchair)?
4. How the space is used (meeting room, collection storage, exhibits, office space, etc.).

5. Does this space have fire, security and climatic control systems?
Are fire extinguishers available?
6. Are your facilities open to the public at stated hours without advanced reservations?

IX. PROGRAMS AND EDUCATIONAL ACTIVITIES

1. Does the organization offer educational or public programs?
2. Does the organization respond to research inquiries from the public?
3. Does the organization have a program for school age (K-12) children related to the school curriculum?
4. What types of special programs or activities does the organization schedule on a regular basis?

X. PLANS AND FUTURE

1. What goals does your organization hope to achieve in the next five years?

A.

B.

C.

D.

E.

F.

2. What goals does your organization hope to achieve in the next ten years?

A.

B.

C.

D.

E.

F.

Supporting Document Checklist

1. Copies of the organization's governing documents - that is, the Constitution or By-Laws. These are required before Incorporation will be granted.
2. List of the names, and addresses of all officers and members of the Board of Trustees, noting those who have special duties or expertise.
3. List of all committees established by the Board.
4. Attach a list showing each position, hours per week and salary, if applicable.
5. Attach a resume for each professional staff member if your organization's operating budget exceeds \$100,000, if applicable.
6. Attach a copy of the organization's IRS tax-exempt letter, if applicable.

Thank you for completing this questionnaire.

Please sign and date the questionnaire when you complete it.

Signature of Preparer: _____

Title of Preparer: _____

Date: _____

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