



APPLICATION FOR TIER 1 CERTIFICATION

Date _____

Please refer to Guidelines for details of requirements and benefits of each.

SECTION I: ABOUT YOUR ORGANIZATION

Name of Organization _____

Mailing Address _____

City _____ ZIP Code _____

Physical Address _____

City _____ ZIP Code _____

Phone _____ Email _____

Contact Person _____

Contact Phone _____ Contact Email _____

Alternate Contact _____

Phone _____ Email: _____

SECTION II: QUALIFYING QUESTIONS:

AHS SUPPORT

Does your museum/historical organization hold an active Arizona Historical Society (AHS) membership at the Institutional or higher level? (Required for certification.) YES NO

PUBLIC TRUST AND ACCOUNTABILITY

Does your organization comply with local, state and federal laws, codes and regulations applicable to its facilities, operations and administration? YES NO

Is your organization committed to public accountability and is it transparent in its mission and operations? YES NO

Does your organization identify the communities it serves, and does it make appropriate decisions on how it serves them? YES NO

MISSION AND PLANNING

Does your organization have a clear understanding of its mission and communicates why it exists and who benefits as a result of its efforts? YES NO

Is your organization guided by a mission statement that clearly describes the purpose of the organization, and a vision statement that clearly describes the organization's future direction? YES NO

LEADERSHIP AND ORGANIZATIONAL STRUCTURE

Is your organization a Non-Profit 501c3? YES NO

Is your organization a Sovereign Nation? YES NO

Does your organization have a governing structure, including by-laws, articles of incorporation, and a board of directors/trustees? YES NO

Does your organization conduct business meetings and hold elections on a regularly scheduled basis? YES NO

How often are business meetings held? _____ How often are elections held? _____

Do the governance, staff and volunteer (as applicable) structures and processes effectively advance the organization's mission? YES NO

Does your organization have volunteers that support the organization? YES NO

Does your organization have a membership program that supports the organization? YES NO

How many active members do you currently have? _____

COLLECTIONS STEWARDSHIP

Is your organization a collecting institution? YES NO

Are your collections appropriate to your mission? YES NO

How do you ensure the preservation of your collections? Describe _____

How does your organization provide public access to your collections? (Exhibits, online access, etc.)

Describe _____

Are your exhibits used and displayed in ways that are appropriate to your mission? YES NO

EDUCATION AND INTERPRETATION

Does your organization offer educational and public programs, special events and other activities that are tied to your mission? YES NO

Please describe examples of programs/events. (You may also include fliers of past or upcoming programs.)

Does your organization present accurate, appropriate, and unbiased content for each of its audiences? YES NO

A minimum of 416 hours per year open to the public are required for Tier 1 certification. How many hours per year is your organization open to the public? _____

How many hours of programming does your organization provide to the public per year? _____

Does your organization meet the following requirements?

- The organization clearly states its overall educational goals, philosophy and messages, and demonstrates that its activities are in alignment with them. YES NO
- The organization provides regular audience engagement that promotes the value of history? YES NO
- The organization facilitates scholarly research. YES NO
- Organizations conducting primary research do so according to scholarly standards. YES NO

FINANCIAL STABILITY

Does your organization legally, ethically and responsibly acquire, manage and allocate its financial resources in a way that advances its mission? YES NO

FACILITIES AND RISK MANAGEMENT

Is your organization's facility clean, well-maintained and provides for the safety and needs of your visitors? YES NO

Does your organization allocate its space and use its facilities to meet the needs of the collections, audience and staff? YES NO

For promotional and reference purposes, please share a few pictures of your facility. (No more than four pictures, please.)

ATTACHMENTS REQUIRED

- Organization's mission statement
- Organization's vision statement
- 501c3 IRS letter, OR Sovereign Nation designation documentation
- Roster of current board of directors/trustees (Names only)
- Examples of mission-driven public education and/or special events
- 2-4 pictures of museum; one exterior; and 2-3 exhibit or program/event photos

I hereby affirm that the above information is true and correct.

Name _____

Title _____
(President or Director required.)

Signature _____

Date _____

Email completed form to: **certified@azhs.gov**

Or mail to: Arizona Historical Society | 1300 N. College Ave. | Tempe, AZ 85281