



2017 StEPs-CT Returning Organization
Application Form:

Mission, Vision, Governance Unit

Section I: Applicant Information

Organization Name: _____

Mailing Address: _____

City: _____ State: _____ Zip + 4: _____

Director or Authorizing Official: _____

Phone: _____ Fax: _____

Email: _____ Web address: _____

Institution's Annual Budget: _____

Are you currently a CLHO member organization? _____ AASLH member organization? _____

Section II: Application Narrative

Answer the following questions, using no more than two (2) 8 ½” x 11” pages. Please include question numbers before each answer. Use a font size of at least 11 points.

- 1. Organization Description & StEPs-CT Update:** Please share your organization’s mission and describe how your programs and activities help to promote and share that mission with your audience. Please describe your organization’s staffing structure, including number of paid and unpaid staff, and volunteers. What has your organization done to advance in StEPs since you completed StEPs-CT?
- 2. Narrative:** Why does your organization want to participate in the StEPs-CT Mission, Vision, & Governance (MVG) unit again? Which MVG StEPs certificates has your organization received to date (if applicable) and on which StEPs performance indicators does your organization need to work? What governance areas or issues at your organization are most in need of improvement? Please describe how participation in this StEPs-CT unit for a second time will benefit your institution. How will you sustain StEPs-CT training within your organization, both during the program itself and after its conclusion? Can your organization commit to attending all training sessions over the duration of the four-month unit and to paying all program fees?

Section III: Supporting Materials

CTH is required to keep certain documents about your organization on file and uses others to aid in the review of your application. Please provide copies of the applicant organization’s:

- Board of directors list
- Current year’s operating budget

Section IV: Certification

Authorizing Official Signature

Title

Authorizing Official Printed Name

Date