

**APPLICATION FORM**  
***Philadelphia Stewardship Program Track III***  
**Risk Assessment and Emergency Planning**

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Organization Name: Director:

Address: Phone:

Fax:

Email:

Institution's Website Address:

Contact Person: Phone:

Title: Fax:

Email:

**Instructions**

Please send five (5) copies of this completed **application form** to the Conservation Center for Art & Historic Artifacts (CCAHA), five (5) copies of a **commitment letter** from the Director or Board Chair, and one (1) copy of each of the following: proof of tax exempt status; most recent annual financial statement; list of Board members; resumes and position descriptions for staff who will participate in the program; written policy statements; summary of preservation needs assessment survey; and any relevant background information. **All application materials must be postmarked or emailed to [psso@ccaaha.org](mailto:psso@ccaaha.org) by September 6, 2019.**

The **application form** is divided into a narrative and a general information section. Responses to the questions in the narrative section should be provided on a separate sheet. In the general information section, check off all applicable answers to each question. If a question is not relevant to your organization, circle the question number. The **commitment letter** should demonstrate the organizational and Board support necessary for preparing an emergency preparedness plan and attending educational programs. Depending on your organization, this letter should be signed by the Executive Director or Board Chair.

CCAHA is available to assist you in completing the application form. Please call Dyani Feige, Director of Preservation Services, for assistance or additional information, 215-545-0613.

**Return completed form to:** Conservation Center for Art & Historic Artifacts  
Preservation Services  
264 South 23rd Street  
Philadelphia, PA 19103

## Section I - Application Narrative

Please answer these questions on a separate sheet.

1. What is the historical significance or uniqueness of your collections and how are your collections holdings related to the mission of your organization?
2. Briefly describe past and any current emergency planning efforts at your institution. If applicable, comment on any previous disasters at your institution and how they impacted the organization.
3. Explain why entering a program to write a risk assessment and develop an emergency plan is appropriate for your institution at this time. Please include the names and titles of staff to be involved in the assessment and planning process.
4. How do you foresee a risk assessment and emergency plan impacting your organization in the long-term?
5. Has your organization received grant funding or increased organizational budgets for collection care in the last three years?

## Section II - General

County:         Bucks             Camden     Chester         Delaware  
                   Montgomery  Philadelphia

Type of Organization:     museum                             historical society         historic house  
                                   library                                 archives                     other \_\_\_\_\_

### A. Staffing and Collection Use

1. Staff size  
\_\_\_\_\_ full time; \_\_\_\_\_ part time  
\_\_\_\_\_ volunteer; \_\_\_\_\_ students

*Please attach a list of staff including titles.*

2. Are there staff members assigned preservation responsibilities?     Y     N  
 full-time  part-time  committee  other \_\_\_\_\_
3. Is your organization open to the public?                             Y     N  
Note hours open.

4. Number of visitors per year: \_\_\_\_\_

Number of researchers per year: \_\_\_\_\_

**B. Surveys and Policies**

1. What surveys/assessments have the institution received or is now being undertaken? Please give approximate dates and surveyor name(s).

- Preservation Needs Assessment \_\_\_\_\_
- CAP \_\_\_\_\_
- IMAP \_\_\_\_\_
- CMAP \_\_\_\_\_
- PDA \_\_\_\_\_
- GMAP \_\_\_\_\_
- Collection Specific Survey \_\_\_\_\_
- Historic Structures Report \_\_\_\_\_
- Other \_\_\_\_\_
- Other \_\_\_\_\_

2. The organization has the following policies (check as many as apply and indicate year written):

- Mission Statement \_\_\_\_\_
- Collection Management Policy \_\_\_\_\_
- Collection Development Policy \_\_\_\_\_
- Collection Priorities for Conservation Treatment \_\_\_\_\_
- Collection Priorities for Salvage in the Event of a Disaster \_\_\_\_\_
- Exhibition Policy \_\_\_\_\_
- Loan Policy \_\_\_\_\_
- Access Policy \_\_\_\_\_
- Handling Policies \_\_\_\_\_
- Registration Procedures for Researchers or Visitors \_\_\_\_\_
- Digital Preservation Policy/Plan \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**C. Collections**

1. Collection materials date from \_\_\_\_\_ to \_\_\_\_\_

2. Please describe the types of materials in your collection and the size of your collection.

3. What percentage of the collection is:  
 accessioned \_\_\_\_\_%; inventoried \_\_\_\_\_%; cataloged \_\_\_\_\_%;  
 processed (i.e. archival materials with finding aids) \_\_\_\_\_%
4. The most important collections are:
5. How much of the collection is on exhibition? \_\_\_\_\_ How much is in storage? \_\_\_\_\_
6. In how many buildings are the collections stored? \_\_\_\_\_
7. Have any of the buildings received historic registration?  Y  N  
 Note type of registration: \_\_\_\_\_
8. What types of materials are typically placed on exhibition?
9. The institution has the following plans or programs in place (check as many as apply and indicate year written):  
 Emergency Preparedness & Recovery Plan \_\_\_\_\_  
 Environmental Monitoring Program (temperature, relative humidity, and light) \_\_\_\_\_  
 Facilities Management Program \_\_\_\_\_  
 Fire Protection Program \_\_\_\_\_  
 Housekeeping Program \_\_\_\_\_  
 In-house Repair Program \_\_\_\_\_  
 Pest Management Program \_\_\_\_\_  
 Preservation Plan for the Collections \_\_\_\_\_  
 Preservation Awareness Training for Staff \_\_\_\_\_  
 Security Program \_\_\_\_\_  
 Theft Reporting Plan \_\_\_\_\_
10. Is there a line item in the budget for preservation/conservation activities?  Y  N

This application was completed by:

\_\_\_\_\_

Name/Title

\_\_\_\_\_

Date

\_\_\_\_\_

Authorization Signatures:

\_\_\_\_\_

Executive Director

\_\_\_\_\_

Date

\_\_\_\_\_

Chair of the Board\*

\_\_\_\_\_

Date

\*Note: If the Chair of the Board is not the appropriate title designation, please have the highest ranking official at your organization sign in this location.

## CHECKLIST FOR ENCLOSURES

Please include **five (5) copies** of the following:

- Completed application form with responses to the narrative section
- Copy of commitment letter from Director or Board Chair

Please include **one (1) copy** of the following:

- Proof of tax exempt status
- Most recent annual financial statement
- List of Board members
- Staff list
- Resumes and position descriptions for participating staff
- Written policy statements
- Summary of preservation needs assessment survey
- Other relevant information, such as brochures, survey summaries, etc.

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***ALL APPLICATION MATERIALS MUST BE POSTMARKED BY SEPTEMBER 6, 2019***

### **Return completed form to:**

Conservation Center for Art & Historic Artifacts (CCAHA)  
Preservation Services  
264 South 23rd Street  
Philadelphia, PA 19103

For further information contact CCAHA:

Tel: (215) 545-0613  
Fax: (215) 735-9313  
Email: [psa@ccaaha.org](mailto:psa@ccaaha.org)  
Website: [www.ccaaha.org](http://www.ccaaha.org)