2019 Nomination Form—Page One

National Medal for Museum and Library Service
(To be filled out by the nominated organization.)

INSTITUTE *of* **Museum** and **Library** SERVICES

A. Cover Sheet

1. Legal Name of your Organization:[1] _____

   Organizational Unit (if different from Legal Name): _____

2. Organization Address

   Street 1: _____   Street 2: _____

   City: _____   County: _____

   State: _____   Zip+4/Postal Code: _____

3. Telephone Number: _____   4. Fax Number: _____

5. Web Address: _____

6. Name of Organization's Director/CEO: _____

   Title: _____

   E-mail: _____   Telephone Number: _____

7. Your Name (the person completing this form): _____

   Title: _____

   E-mail: _____   Telephone Number: _____

8. Type of Organization (check one):

   - ☐ Academic Library
   - ☐ Aquarium
   - ☐ Arboretum/Botanical Garden
   - ☐ Art Museum
   - ☐ Children's/Youth Museum
   - ☐ Digital Library
   - ☐ General Museum[2]
   - ☐ Historic House/Site
   - ☐ History Museum
   - ☐ Library Association
   - ☐ Library Consortium
   - ☐ Museum Library

   - ☐ Natural History/Anthropology Museum
   - ☐ Nature Center
   - ☐ Planetarium
   - ☐ Public Library
   - ☐ Research Library/Archives
   - ☐ School Library, or School District applying on behalf of a School Library or Libraries
   - ☐ Science/Technology Museum
   - ☐ Special Library
   - ☐ Specialized Museum[3]
   - ☐ Zoo
   - ☐ Other, please specify: _____

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[1] If your organization is not an eligible entity on its own, then enter the name and address of the eligible entity under "Legal Name." For example, if a library that is part of a parent organization such as a university is applying, it would enter the university under "Legal Name" and the library under "Organizational Unit."

[2] A museum with collections representing two or more disciplines (e.g., art and history)

[3] A museum with collections limited to one narrowly defined discipline (e.g., textiles, stamps, maritime, ethnic group)

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A. Cover Sheet (continued)

9. Governing Control (check one):
   - ☐ State Government
   - ☐ County Government
   - ☐ City or Township Government
   - ☐ Special District Government
   - ☐ Regional Organization
   - ☐ U.S. Territory or Possession
   - ☐ Independent School District
   - ☐ Public/State-Controlled Institution of Higher Education
   - ☐ Indian/Native American Tribal Government (Federally Recognized)
   - ☐ Indian/Native American Tribal Government (Other than Federally Recognized)
   - ☐ Public/Indian Housing Authority

   - ☐ Nonprofit with 501(c)3 IRS Status (Other than Institution of Higher Education)
   - ☐ Nonprofit without 501(c)3 IRS Status (Other than Institution of Higher Education)
   - ☐ Private Institution of Higher Education
   - ☐ Individual
   - ☐ For-Profit Organization (Other than Small Business)
   - ☐ Small Business
   - ☐ Hispanic Serving Institution
   - ☐ Historically Black Colleges and Universities (HBCUs)
   - ☐ Tribally Controlled Colleges and Universities (TCCUs)
   - ☐ Alaska Native and Native Hawaiian Serving Institutions
   - ☐ Nondomestic (non-U.S.) Entity
   - ☐ Other, please specify: _____

10. Nominated Organization's D-U-N-S® Number:[4] _____

11. Nominated Organization's Employer/Taxpayer Number (EIN/TIN): _____

12. Congressional District of Nominated Organization:[5] _____

13. Organization's Annual Operating Budget: _____

14.

A. Fiscal Year	B. List Total Revenue/ Support Income[6]	C. List Total Expense/ Outlays[7]	Difference between B. Total Revenue and C. Total Expenses
Most recently completed FY ____ (insert)			
Second most recently completed FY ____ (insert)			

15. If your organization had a deficit greater than 10% of your annual operating budget for any of the fiscal years listed above, please explain the circumstances of this deficit.

16. Has your organization had an A-133 audit in the past three years?   ☐ Yes   ☐ No

17. If no, has your organization had a financial statement audit in the past three years?   ☐ Yes   ☐ No

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[4] Verify that your organization has a D-U-N-S® Number or take steps to obtain one. Your organization can receive a D-U-N-S® Number at no cost by calling the dedicated toll-free D-U-N-S® Number request line at 1-866-705-5711 or by visiting www.dnb.com/us.
[5] Congressional Districts can be found by entering the zip code of the institution at www.house.gov/representatives/find.
[6] For nonprofit tax filers Total Revenue can be found on line 12 of the IRS Form 990.
[7] For nonprofit tax filers Total Expenses can be found on line 18 of the IRS Form 990.

![Institute of Museum and Library Services logo] INSTITUTE of **Museum** and **Library** SERVICES

2019 Nomination Form—Page Three

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A. Cover Sheet (continued)

18. Were there any material weaknesses identified in your organization's prior year's audit report? ☐ Yes ☐ No ☐ Not applicable
(A material weakness is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.)

19. If yes, please explain.

20. Number of full-time paid organization staff: _____   Number of part-time paid organization staff: _____

    Number of full-time unpaid organization staff (including

    volunteers): _____   Number of part-time unpaid organization staff (including

    volunteers): _____

21. Total number of days the organization was open to the public for the past 12-month period prior to application: _____

22. Name of Nominating Individual: _____

    Title: _____   Relationship to Organization: _____

    E-mail: _____   Telephone Number: _____

2019 Nomination Form—Page Four

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INSTITUTE of Museum and Library SERVICES

In addition to the Cover Sheet (Section A), your submission must include the following parts (Sections B-D below). Do not include additional cover letters, binders, folders, or attachments.

B. Executive Summary and Mission Statement (not to exceed one single-spaced page; no less than 12-point type)
- Summarize why you believe this organization deserves to win the National Medal for Museum and Library Service.
- Provide this organization's mission statement or statement of purpose as well as a brief institutional history.

C. Narrative (not to exceed four single-spaced pages; no less than 12-point type)
The National Medals are designed to recognize outstanding libraries and museums that have made significant contributions in service to improve the wellbeing of their communities. These institutions exceed expected levels of community outreach beyond a single program or exhibit by building community cohesion and serving as catalysts for positive community change. Nominees should review the IMLS strategic plan and highlight how their work aligns (e.g., promoting lifelong learning, building institutional capacity, increasing community access). We are particularly interested in enhanced services for veterans/military families, sustained opportunities for diverse youth and young professionals, and assistance to marginalized young families or seniors. Address questions 1-4 thoroughly and succinctly. The jurors considering the pool of potential medal recipients will focus carefully on your answers to these questions.

1. *Describe the community[8] and the particular community needs addressed.*
   - Quantify and describe the population groups/communities your organization is reaching through its programs, services, and/or partnerships.
   - What particular community needs do you address?
   - How did you identify these particular needs and work with the community to craft solutions?
   - How are these needs incorporated into your institution's strategic plan?
   - How do your institutional culture, values, and strategies align with this community work?

2. *Describe the programming your organization has developed for these particular community needs. (See section C.1.)*
   - Please include a brief description of your full portfolio of services, even if you focus on a particular area of service.
   - How do you involve your community in the development of your programs?
   - How have these partnerships increased your ability to reach out to the targeted population groups and communities you serve?
   - Describe how you serve community members with special needs. You should address accessibility for people with disabilities.
   - Organizations applying in the Digital Library category should address:
     - services to your community including services to other organizations and services to end users;
     - how an understanding of audiences, either current or potential, has driven the approach to providing access to your organization's programs and resources;
     - sustainability and preservation plans for the digital library;
     - accessibility for people with disabilities.

3. *Describe what impact your organization's programs and services have had on the identified community needs.*
   - Describe the evaluation you conduct of your programs (qualitative and/or quantitative). How has this information informed the programs? What have you learned about your audience(s)?
   - If you do not have a formal evaluation of programs, how do you measure success?
   - How have you used this information to plan other programs and services?

4. *Describe your organization's financial context in light of your community programming.*
   - List your organization's three primary sources of revenue. Do you have a sustainable funding model that will enable growth for these particular programs?
   - Describe any private or non-profit groups that support your mission and activities and the extent of their support.

D. Letters of Support (required - three maximum, submitted with the Nomination Form)
- These letters should come from community members who have direct knowledge of the organization's community service and the particular programs in your nomination. We recommend that the letters come from different segments of the broader community served by the institution and from individuals who have either witnessed or experienced first-hand a particular program or service.
- Nomination letters from members of Congress are welcome and will not count against the three-letter maximum.
- Address letters to the Director of the Institute of Museum and Library Services and include them with this Nomination Form.

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[8] Academic and research libraries may interpret "community" as your campus community and/or local community.