



2020 Application for Virtual FOCoS

Contact Information

Name of Organization: _____ Date Established: _____
Contact Name: _____ Job Title: _____
Address: _____ City: _____, NC
Zip: _____ Phone Number: _____
Email: _____ Website: _____

Budget Information

Current Annual Budget (include personnel and operating): \$ _____
Full Time Staff: _____ Part Time Staff: _____ Volunteers: _____

Sources of Funding:

- Tax Supported _____%
- Private Funding _____%
- Grants _____%
- Endowment _____%

Governance:

- Private _____
- Government _____
- Non-Profit _____

Expertise Information

Choose two areas of need of assessment:

- Collections management
- Administration of facility structure
- Educational programming
- Enlisting and training volunteers
- Marketing and public relations

To be answered on separate sheets of paper by the site director or project manager (not to exceed four pages total):

- 1) Brief history and description of your site.
- 2) Describe your programs and services.
- 3) Why do you need help specifically in these two areas?

Please also provide the following:

- 1) Last year's income/expense statement
- 2) Current balance sheet

Applications will be reviewed by committee and should be sent to: vicepresident@ncmuseums.org

Christian Edwards

Vice President, North Carolina Museums Council