IF/THEN® Champions Network

Network Membership Form for Individuals and Organizations

How to Apply and Questions

1. Complete the online network membership form at astc.org/ifthen/champions-network/.
2. Organizational members only: Have an authorized official complete the Organizational Commitment Form.

Email Emily Early, Senior Program Manager at the National Girls Collaborative Project, at eearly@ngcproject.org with any questions.

IF/THEN® Champions Network Membership Form Questions

The following questions are for your reference only. Please view the project webpage and complete the membership form here to join.

Network Membership Form Selection

Select which form you would like to complete, either on behalf of your organization or as an individual.

- Are you completing this network membership form as an individual member or an organizational member?*
  - Individual Member
  - Organizational Member

Individual Network Membership Form

If applying as an individual, please complete these questions. If applying on behalf of your organization, you can move on to the organizational questions.

Contact Information

* Indicates required question
- First name:
- Last name:
- Email Address:
- City:
- State:
- Zip Code:
- Country:
• How many years have you worked in museums and/or science centers?*
  o Less than 3 years
  o 3–5 years
  o 6–10 years
  o 11–20 years
  o 21 or more years
  o N/A
• Are you currently affiliated with an organization?*
  o Yes
  o No
• If you are affiliated with an organization:
  o Organization Name:
  o Organization website:
  o Is your organization a member of the Association of Science and Technology Centers (ASTC)? Individuals are not required to belong to an ASTC-member organization, but if your organization is interested in joining, you can learn more and join at: https://www.astc.org/membership/.
    ▪ Yes
    ▪ No
    ▪ No, but we would like to join
    ▪ Other
  o Please indicate which one of the following best describes your institution or organization:
    ▪ Aquarium
    ▪ Arboretum/Botanic garden
    ▪ Children’s museum
    ▪ Historic house/site
    ▪ History museum/Historical society
    ▪ Natural history/Anthropology museum
    ▪ Nature center
    ▪ Planetarium
    ▪ Specialized museum
    ▪ Science/Technology center/museum
    ▪ Other nonprofit organization
    ▪ Other:
  o What is your organization’s size?
    ▪ Very small (0–9 full time paid staff)
    ▪ Small (10–30 full time paid staff)
    ▪ Medium (31–100 full time paid staff)
    ▪ Large (100–250 full time paid staff)
    ▪ Very large (more than 250 full time paid staff)
  o What is your current job title?
  o Which of the following best describes your current position? Check all that apply, as we know that many professionals fulfill multiple roles within an organization.
    ▪ Board of Directors/Trustee
    ▪ CEO/Executive Director/President or other executive leadership role
    ▪ Communications/PR (may also include graphic design or videography)
    ▪ Consultant/Independent professional
    ▪ Collections management/Registrar (living or artifact collections)
- Community partnerships or relationships
- Curatorial
- Development or fundraising
- Educator/Education (may also include interpreter, instructor, teacher, or facilitator)
- Evaluation
- Events
- Exhibit developer, designer, technician, conservator, or fabricator
- External affairs or outreach
- Finance/Accounting
- Government Agency Staff
- Government Relations/Public Policy
- Human Resources
- Marketing/Sales
- Membership
- Operations/Administration (may also include information technology, security, facilities)
- Program developer, designer, or manager
- Researcher (may include science, education, learning, or social science)
- Visitor Services
- Volunteer, intern, or student
- Volunteer Management
- Manager, supervisor, or unit director
- Vice president or other senior director
- Other. If your position is not well-described by the above options, please describe it in a few words here: ____________

- How likely is it that your organization will want to join the IF/THEN® Champions Network at a later date?
  - Very likely
  - Somewhat likely
  - Unlikely
  - My organization is already a member of the network
  - I’m not sure
  - Other:

- If you are not affiliated with an organization:
  - Please tell us a bit more about yourself, including professional experience, areas of interest, and hobbies.

**Past Experience and Interest**

- What previous experience have you had with the IF/THEN® Initiative and Collection, if any? Check all that apply.*
  - I have browsed the Collection
  - I have used the Collection in my work
  - My organization received an IF/THEN® Gender Equity Grant from ASTC
  - I have seen the Collection used in an exhibit
  - I am not yet familiar with IF/THEN® Initiative or Collection
  - Other:

- Have you been involved in implementing efforts focused on girls and other populations historically excluded from science/STEM?*
  - Yes
Why are you interested in becoming an IF/THEN® Champion? Check all that apply.*
- I want to learn more about advancing gender equity in science/STEM
- I want to learn more about the IF/THEN® Initiative and Collection
- I want to meet and engage with others who are working to advance gender equity in STEM
- I want to bring my organization on board in order to receive exhibit kits, programs, grants, and other resources from the network
- Other:

What topics are you interested in learning more about through your involvement in the IF/THEN® Champions Network? Check all that apply.*
- Statistics and research around gender equity in STEM
- Using the IF/THEN® Collection to design exhibits
- Using the IF/THEN® Collection in educational programming
- Other:

Individual Commitment
All individuals who complete the IF/THEN® Champions Network sign-up form, must agree to commit to:*
- Amplifying network activities and messaging throughout your individual or organizational networks, as appropriate
- Attending a minimum of 50% of IF/THEN® webinars from date of joining the network
- Contributing to stories and blogs as requested (no more than once per year)
- Participating in annual data collection activities (i.e. survey, interviews) to review services and activities, collect impact stories, and to inform continued network growth
- If not already an organizational member and if applicable, share about the network with organizational leadership and encourage organizational membership

By checking this box, I acknowledge that I have reviewed these commitments, and I agree to participate.

Communication Consent
- I consent to NGCP and ASTC processing and storing my contact data for communication purposes and understand that I may unsubscribe from mailing lists at any time, using the "unsubscribe" link provided at the bottom of each email or writing to eearly@ngcproject.org.*
- By checking this box, I elect to begin receiving the IF/THEN® Champions Network electronic newsletter. I understand that I can unsubscribe at any time by using the "unsubscribe" link provided at the bottom of each email or by writing to eearly@ngcproject.org.*
- I understand that my basic information (including name, title, and organization) may be used in professional networking resources created by NGCP and ASTC for the IF/THEN® Champions Network. This may include online forums, a network member list, and a map of network members.*

Privacy Policy Consent
In accordance with the General Data Protection Regulations (GDPR) and other international privacy laws, please review ASTC and NGCP’s privacy policies at https://www.astc.org/privacy-
policy/ and https://ngcproject.org/privacy-policy and acknowledge that you agree to the use and storage of your personal data for the purposes of joining this network.

☐ I have read and understand ASTC and NGCP’s privacy policies and agree to the use and storage of my personal data

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Organizational Network Membership Form

If applying on behalf of your organization, please complete these questions.

Contact and Organization Information

* Indicates required question

- First name: *
- Last name: *
- Email Address: *
- Organization Name: *
- Address: *
- City: *
- State: *
- Zip Code: *
- Country: *
- Organization website: *

- Is your organization a member of the Association of Science and Technology Centers (ASTC)? *
  - Note: Only ASTC-member organizations are eligible to join the IF/THEN® Champions Network as organizational members. If your organization is not yet a member, you can learn more and join at: https://www.astc.org/membership/.
    - Yes
    - No
    - No, but we would like to join
    - Other

- Please indicate which one of the following best describes your institution or organization: *
  - Aquarium
  - Arboretum/Botanic garden
  - Children’s museum
  - Historic house/site
  - History museum/Historical society
  - Natural history/Anthropology museum
  - Nature center
  - Planetarium
  - Specialized museum
  - Science/Technology center/museum
  - Other nonprofit organization
  - Other:

- What is your organization’s size? *
  - Very small (0–9 full time paid staff)
  - Small (10–30 full time paid staff)
  - Medium (31–100 full time paid staff)
  - Large (100–250 full time paid staff)
What is your current job title?*
Which of the following best describes your current position? Check all that apply, as we know that many professionals fulfill multiple roles within an organization.*
- Board of Directors/Trustee
- CEO/Executive Director/President or other executive leadership role
- Communications/PR (may also include graphic design or videography)
- Consultant/Independent professional
- Collections management/Registrar (living or artifact collections)
- Community partnerships or relationships
- Curatorial
- Development or fundraising
- Educator/Education (may also include interpreter, instructor, teacher, or facilitator)
- Evaluation
- Events
- Exhibit developer, designer, technician, conservator, or fabricator
- External affairs or outreach
- Finance/Accounting
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- Other. If your position is not well-described by the above options, please describe it in a few words here: ____________

**Individual Members**

At least one individual must join the IF/THEN® Champions Network as a member on behalf of your organization, but you have the option of adding more. You can also include additional staff members in the network later if desired.

- Who will serve as the primary network member on behalf of your organization?*
  - Me (the person completing this form)
  - Someone else
- If you said someone else, please provide their full name, job title, and email address:
- If there are other individuals at your organization also interested in joining the IF/THEN® Champions Network, please provide their full names, job titles, and email addresses:

**Past Experience and Interest**
• What previous experience has your organization had with the IF/THEN® Initiative and Collection, if any? Check all that apply.*
  o My organization is familiar with the Collection and its goals
  o My organization has used the Collection in an exhibit
  o My organization has used the Collection in our educational programming
  o My organization received an IF/THEN® Gender Equity Grant from ASTC
  o My organization is not yet familiar with the IF/THEN® Initiative or Collection
  o Other:
• Has your organization used the ASTC IF/THEN® Gender Representation Toolkit?*
  o Yes
  o No
  o I don’t know
  o Other:
• Has your organization offered any camps or programs designed to encourage girls in science/STEM?*
  o Yes
  o No
  o Other:
• Why is your organization interested in being part of the IF/THEN® Champions Network? Check all that apply.*
  o My organization wants to learn more about advancing gender equity in STEM
  o My organization wants to learn more about the IF/THEN® Initiative and Collection
  o My organization wants to collaborate with others who are working to advance gender equity in STEM
  o My organization is interested in exhibit kits, programs, grants, and other resources from the network
  o Other:
• What topics is your organization interested in learning more about through your involvement in the IF/THEN® Champions Network? Check all that apply.*
  o Statistics and research around gender equity in STEM
  o Using the IF/THEN® Collection to design exhibits
  o Using the IF/THEN® Collection in educational programming
  o Other:

**Organizational Commitment Form**

All organizations that complete the IF/THEN® Champions Network organizational membership form must also have an authorized organizational representative complete the Organizational Commitment Form at this link. This form outlines the expectations your organization will commit to as network members.*

**Communication Consent**

❑ I consent to NGCP and ASTC processing and storing our organizational contact data for communication purposes and understand that we may unsubscribe from mailing lists at any time, using the "unsubscribe" link provided at the bottom of each email or writing to eearly@ngcproject.org.*

❑ By checking this box, my organization elects to begin receiving the IF/THEN® Champions Network electronic newsletter. I understand that we can unsubscribe at any time by using the "unsubscribe" link provided at the bottom of each email or by writing to eearly@ngcproject.org.*
I understand that my organization’s basic information (including organization and organizational contacts) may be used in professional networking resources created by NGCP and ASTC for the IF/THEN® Champions Network. This may include online forums, a network member list, and a map of network members.*

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I have read and understand ASTC and NGCP’s privacy policies and agree to the use and storage of my personal data.