

**QUESTIONNAIRE FOR MEMBERSHIP IN ASSOCIATIONS**

**DATE SUBMITTED:** \_\_\_\_\_

**Spending Unit:** \_\_\_\_\_ **FUND:** \_\_\_\_\_  
**ORG:** \_\_\_\_\_  
**FEIN:** \_\_\_\_\_

**ALL QUESTIONS MUST BE ANSWERED IN FULL**

1. Name of Association: \_\_\_\_\_
2. If this is a NEW association, what are the annual dues? \_\_\_\_\_
3. What factors are used to determine amount of dues? \_\_\_\_\_  
\_\_\_\_\_
4. Do you anticipate any additional increase in dues for the next 3 years? \_\_\_\_\_
5. List all other estimated costs (other than dues), such as registration fees, tuition, travel, association meetings, conventions, etc. \_\_\_\_\_  
\_\_\_\_\_
6. What is the purpose of the association? \_\_\_\_\_  
\_\_\_\_\_
7. What tangible benefits will the State derive from this membership? \_\_\_\_\_  
\_\_\_\_\_
8. List specific individuals or groups in the State that will benefit from your participation in this association: \_\_\_\_\_  
\_\_\_\_\_
9. What is the estimated number of staff members attending association meetings or conventions during any fiscal year and the estimated travel cost? \_\_\_\_\_  
\_\_\_\_\_
10. Could one agency participate and submit a written report to other agencies involved? \_\_\_\_\_
11. Will a written report be made to the spending unit by each attending staff member after association meeting attendance and will a copy of this report be available to the Government? \_\_\_\_\_  
\_\_\_\_\_
12. Do the association members receive any written material and is this material available to any other interested individuals? \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Dean or Director**

\_\_\_\_\_  
**Vice President Signature**

**(USE REVERSE SIDE IF NECESSARY)**