

ALASKA MUSEUM SURVEY 2020

Thank you for taking the time to participate in the 2020 Alaska Museum Survey conducted by the Alaska State Museum and Museums Alaska. Every ten years the Alaska State Museum surveys museums across Alaska. The data results in a profile that helps chart the development of Alaska's museum field, assists with statewide advocacy, and helps establish training and funding priorities.

Before you begin the survey, we recommend that you gather recent visitation data, your organization's budget, and information on staffing, volunteers, and collections using this template. **Please only submit one survey response per institution by 5p.m. on 1/27/20.** We recommend that the Director or equivalent submit the responses. If you have any questions about this survey or the resulting report, please contact Anjuli Grantham, Curator of Statewide Services, at 907-465-4806. Use the buttons at the bottom to move forward and back between pages. Once you select next, your answer will be saved for that page but you can go back and change your answers. **When you press DONE after question #57 that will submit the survey.** An asterisk (*) indicates that this is a question that requires an answer. Please note that if a question does not apply to your institution, we ask that you put a n/a or leave blank. This survey should take approximately 30 minutes if you have already gathered the data.

When you complete the survey, your institution will be entered to win one of two prizes: a year organizational membership in Museums Alaska, or a Museums Alaska travel mug and tote.

Your answers to questions 1 – 49 will be anonymous to establish operational trends within the Alaska museum community over the last 10 years. Gail Anderson & Associates has been hired to conduct this survey and assure the confidentiality of your answers to questions 1-49. The last eight questions will be attributed to your institution. Please visit [SurveyMonkey Privacy Policy](#) for details about the submission platform's privacy protections.

INTRODUCTION

| Question | Answers |
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| *1. I have read, understand and agree to how my answers will be collected and used. (Yes will allow you to take the survey and no will exit you from the survey.) | Yes No |

GENERAL INSTITUTION QUESTION

***2. Type of Institution**

Select the closest description of your institution:

- Aquarium, nature center, zoo, or wildlife center
- Arboretum or botanical garden
- Archaeological repository or research collection
- Archive
- Art museum (includes art gallery, art center)
- Children's museum
- Cultural center
- General museum (collections represents 2 or more disciplines)
- Historic house / site
- History museum
- Historical Society
- Interpretive or visitor center
- Natural history museum
- Science or technology museum
- Tribal museum
- Other: Please specify

VISITOR & USER INFORMATION: We want to know who is using Alaska museums.

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| <p>*3. Annual onsite attendance (most current completed year, use n/a if you do not know or do not collect)</p> | <p>Fill-in</p> |
| <p>4. Annual attendance from offsite programs (Most current completed year, use n/a if you do not know or do not collect)</p> | <p>Fill-in</p> |
| <p>5. Annual online attendance (Most current completed year, use n/a if you do not know or do not collect)</p> | <p>Fill-in</p> |
| <p>6. Annual attendance by local residents (Most current completed year, use n/a if you do not know or do not collect)</p> | <p>Fill-in</p> |
| <p>7. Annual school group attendance (most current completed year, use n/a if you do not know or do not collect)</p> | <p>Fill-in</p> |
| <p>8. Annual tourist attendance (out-of-town visitors) (most current completed year, use n/a if you do not know or do not collect)</p> | <p>Fill-in</p> |

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| <p>9. When is your institution open to the public?</p> | <p>Select one: Year round Seasonally (Spring/Summer) Seasonally (Spring/Summer/Fall) Seasonally (Fall/Winter) Special events or request only Not open to the public Other:</p> |
| <p>10. Do your visitors reflect the diversity of your community?</p> | <p>Select one: Yes No Somewhat Do not know</p> |
| <p>11. General adult admission price:</p> | <p>Select one: \$0/Do not charge \$1-\$5 \$6-\$10 \$11-\$19 \$20+ Donation suggested</p> |
| <p>12. Does your institution or friends group offer a membership program?</p> | <p>Select one: Yes No</p> |
| <p>13. If there is a membership program, how many total members do you have?</p> | <p>Fill-in</p> |

GOVERNANCE: We want to understand your organizational structure.

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| <p>*14. Governance structure Who governs the museum?</p> | <p>College/University Federal Government For-profit organization Nonprofit organization City or Borough State of Alaska Tribal organization</p> |
| <p>Who owns the permanent collection?</p> | <p>College/University Federal Government For-profit organization Nonprofit organization City or Borough State of Alaska Tribal organization</p> |
| <p>Who owns the building?</p> | <p>College/University Federal Government For-profit organization Nonprofit organization City or Borough State of Alaska Tribal organization</p> |
| <p>Who maintains the building?</p> | <p>College/University Federal Government For-profit organization Nonprofit organization City or Borough State of Alaska Tribal organization</p> |

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| Who pays staff salaries? | College/University Federal Government For-profit organization Nonprofit organization City or Borough State of Alaska Tribal organization |
| 15. If you have a Board of Directors/Trustees, do the members reflect the diversity of your community? | Select one: Yes No Somewhat Do not know |
| 16. If you have a Board of Directors/Trustees, how often do you provide training opportunities? | Select one: Annually Twice a year Quarterly Rarely Never |
| 17. If you have a Board of Directors/Trustees, are the members clear about their fiduciary responsibilities? | Select one: Yes No |
| 18. Select all that apply to your institution's core documents: Our institution has the following core documents: | Select all that apply: Mission Statement Institutional Code of Ethics Strategic Institutional Plan Disaster Preparedness/Emergency Response Plan Collections Management Policy |

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| <p>Our institution has updated the following core documents in the last 3 years:</p> | <p>Select all that apply: Mission Statement Institutional Code of Ethics Strategic Institutional Plan Disaster Preparedness/Emergency Response Plan Collections Management Policy</p> |
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STAFF & VOLUNTEERS: We want to know about Alaska museum workplaces.

| Question | Answers |
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| *19. Total number of paid permanent full-time employees: | Fill-in |
| 20. Total number of paid permanent part-time employees: | Fill-in |
| 21. Total number of paid seasonal and/or temporary employees: | Fill-in |
| 22. Total number of paid interns: | Fill-in |
| 23. Does your staff reflect the diversity of your community? | Select one: Yes No Somewhat Do not know |
| *24. Does your institution offer the following benefits for paid full-time employees: Healthcare insurance Retirement contributions PTO (Paid Time Off for vacation, sick, etc.) | Select one: Yes No |
| 25. Total number of volunteers and/or unpaid interns: | Fill-in |
| *26. Total number of volunteer hours in a year: | Fill-in |

PUBLIC PROGRAMS & SERVICES: We want to know how museums serve their communities.

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| <p>27. Exhibitions:</p> | <p>Check all that your institution offers: Permanent Temporary Traveling exhibitions from another institution</p> |
| <p>28. Public programs</p> | <p>Check all that your institution offers: Art/craft demonstrators, performances, + other Collection available for research or use Guided tours Museum-related public events (Lectures, films, etc.) School activities in the museum School activities at local schools Special events (festivals, holiday events, etc.) Specialized publications</p> |
| <p>29. PR and communication activities</p> | <p>Check all that your institution uses: Website Social media (Twitter, Instagram, Facebook, etc.) E-newsletters/blogs Press releases Paid advertising (internet, print, mail, and/or radio) Other:</p> |
| <p>30. What strategies do you use to engage diverse community members with your institution?</p> | <p>Select all that apply: Hire diverse staff members Use diverse/multiple languages in exhibitions Provide access to research or borrow collections Engage community curators to create exhibitions Involve in advisory committees of various types (exhibition, collections, other, etc.) Other:</p> |

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| 31. Does your institution conduct visitor evaluation or research? | Select one: Yes – Regularly Yes – Sporadically/sometimes No |
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COLLECTIONS: We want to know about Alaska museums collections and collections practices.

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| <p>*32. Collections</p> <p>Approximate number of objects in permanent collection</p> | <p>Fill-in</p> |
| <p>33. On average, how many items does your institution add to its collection every year?</p> | <p>Fill-in</p> |
| <p>34. Does your institution currently have human remains, funerary objects, sacred objects and/or objects of cultural patrimony?</p> | <p>Select one: Yes No Do not know</p> |
| <p>35. Has your institution initiated Native American Graves Protection and Repatriation Act (NAGPRA) consultation?</p> | <p>Select one: Yes - ongoing/currently active No - we have not started Do not know</p> |
| <p>36. Approximately what percentage of the object collection is catalogued?</p> | <p>Select one: 0% 1-25% 26-50% 51-75% 76-100% Do not know</p> |

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| <p>37. Approximately what percentage of the archival collection is catalogued?</p> | <p>Select one: 0% 1-25% 26-50% 51-75% 76-100% Do not know N/A</p> |
| <p>38. Are your institution's collections insured?</p> | <p>Select one: All Some None</p> |
| <p>*39. Does your institution have the following for collection management: Adequate space for collections Adequate collections storage furniture Adequate archival storage materials to properly house collections Temperature and humidity controls and monitoring schedule Integrated pest management plan Written collections management policy for digital collections</p> | <p>Select one for each question: Yes No</p> |

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| 40. What computerized collection management system does your institution use? | Select one: Argus MS Access MS Excel Mukurtu PastPerfect Re:Discovery No computerized database Other TMS |
| 41. Are the collections available online? | Select one: All Some None N/A |

FACILITIES & GROUNDS: We want to know what kind of spaces museums occupy.

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| <p>42. Your facility includes:</p> | <p>Check all that apply: Administrative offices Archives or library available to public Auditorium / performance venue Café or restaurant Classroom / other dedicated space for educational programs Collections storage – onsite Collection storage – offsite Event rental space Gift shop / Museum Store Historic structures HVAC system Outdoor space Permanent exhibit galleries Public restrooms Temporary exhibit galleries Research room for visitors to access collections</p> |
| <p>43. Total square feet</p> | <p>Select one: Under 1,000 1,000 – 5,000 5,001 – 10,000 10,001 – 20,000 20,001-30,000 30,001 above</p> |
| <p>44. Do you have high-speed internet?</p> | <p>Select one: Yes No</p> |

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| *45. Is your facility ADA compliant? | Select one: Yes No Do not know In the process |
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FINANCIAL INFORMATION (Use most recent completed fiscal year): We want to understand the financial health of Alaska museums.

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| <p>*46. Actual annual operating budget (most current)</p> | <p>Select one: Under \$10,000 \$10,001-\$50,000 \$50,001-\$75,000 \$75,001-\$150,000 \$150,001-\$300,000 \$300,001-\$500,000 \$500,001-\$1M \$1 Million +</p> |
| <p>*47. Select the highest revenue/income sources for your institution</p> | <p>Select one: Earned Income (admissions, program fees, exhibition fees, rentals, store, cafe, etc.) Contributed Income (membership, donations, grants, corporate contributions, fundraising activities, underwriting, etc.) Annual Appropriations from Government Agencies (Federal, State, Borough, Local) Operating support from parent organization or Tribal organization</p> |

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| <p>*48. Estimate the percentage of each revenue/income sources for your institution</p> | |
| <p>Earned Income (admissions, program fees, exhibition fees, rentals, store, cafe, etc.)</p> | <p>Fill-in</p> |
| <p>Contributed Income (membership, donations, grants, corporate contributions, fundraising activities, underwriting, etc.)</p> | <p>Fill-in</p> |
| <p>Annual Appropriations from Government Agencies (Federal, State, Borough, Local)</p> | <p>Fill-in</p> |
| <p>Operating support from parent organization or Tribal organization</p> | <p>Fill-in</p> |

CHALLENGES: We want to know what resources and support are needed to help Alaska museums in the future.

***49. Top three issues facing your institution?**

Select three:

- Access to consultants/outside museum professionals/experts
- Adequate benefits and salaries for staff
- Board engagement
- Board recruitment
- Capital improvements
- Collection storage
- Community support
- Economic stability and funding
- Relationship with governing agency
- Staffing shortage
- Staff training/professional development
- Staff turnover/retaining staff/staff burnout
- Upgrade + reinstall permanent exhibitions
- Other:

INSTITUTIONAL INFORMATION

Information provided below will be provided to the survey sponsors Alaska State Museum and Museums Alaska. The following answers will provide a list of survey participants, help support future consultations, and funding priorities. This identified information will not be linked to your anonymous answers above.

If your institution is selected in the prize drawing we will contact you at the email address provided below.

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| *50. Contact Information Director/Authorizing Official Name | Fill-in |
| Name of Institution | |
| Street Address | |
| Mailing Address | |
| City/Town | |
| Zip Code | |
| Email Address | |
| Phone number | |
| 51. Legislative House District Go to: akleg.gov and scroll to the bottom. Type your institution's address into the box that says "Who represents me?" The House District Number is listed after AK | |

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| 52. Friends Group Contact Information (if your institution has a friends group) Main Contact Name | |
| Name of Friends Group | |
| Street Address | |
| Mailing Address | |
| City/Town | |
| Zip Code | |
| Email Address | |
| Phone number | |
| 53. Mission of your institution: | |
| *54. The collections include: | Select all that apply: Objects Archives Library materials Digitized material Historic buildings |
| *55. Do you share your facility with another entity? | Select one: Yes No |

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| 56. If you share your facility, what type of entity? | Select one: Library School Tribal Center Another non-profit Other: |
| 57. In the next 5 years, will your institution be conducting a capital improvement project (renovation/remodel, new facility, and/or expansions): | Select one: Yes No |