



National Association for Gifted Children  
 1707 L Street, NW  
 Suite 550  
 Washington, DC 20036  
 Tel: (202) 785-4268  
 Fax: (202) 785-4248  
 Web site: www.nagc.org

## REQUEST FOR AFFILIATION WITH THE NATIONAL ASSOCIATION FOR GIFTED CHILDREN

*(application will be reviewed and voted on by the NAGC Board at its next upcoming meeting)*

**1) NAME OF ORGANIZATION \*\*** \_\_\_\_\_  
 (organization name the membership will be held in)

Contact Person \*\* \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

Email: \_\_\_\_\_ Website: \_\_\_\_\_

**2) Do you have a tax designation of 501(c) (3)?**       yes       no

**President** \_\_\_\_\_ Term expires (month / year) \_\_\_\_\_

Address  Address same as above      Term is for       1 year       2 years

Telephone (w) \_\_\_\_\_ (h) \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### 2) ORGANIZATION MEMBERSHIP INFORMATION

Number of Members (as of January 1, 2008) \_\_\_\_\_

**Please attach a description of your organizations mission and purpose.**

**Is your organization open to anyone supporting the mission?**

yes  
 no: Explain \_\_\_\_\_

**Services (please attach a list of member services and benefits)**

**Are you aware of any other gifted organizations in your state that provide services to members?**

no  
 yes: (list orgs.) \_\_\_\_\_

**Does your organization sponsor an annual conference or convention?**  no  yes

If yes:

Date last held \_\_\_\_\_ Number of attendees \_\_\_\_\_

Attendance by % Teachers \_\_\_\_\_ Parents \_\_\_\_\_

Students \_\_\_\_\_ Other \_\_\_\_\_

Dates of future conferences: \_\_\_\_\_

**Do you have a newsletter?**  no  yes

(please provide contact information for the newsletter editor, below)

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone (w) \_\_\_\_\_ (h) \_\_\_\_\_ Frequency of Publication \_\_\_\_\_

Fax \_\_\_\_\_ E-mail: \_\_\_\_\_

**Do you have a legislative chair / committee?**  no  yes (please provide contact information)

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone (w) \_\_\_\_\_ (h) \_\_\_\_\_

Fax \_\_\_\_\_ E-mail: \_\_\_\_\_

**Please provide the association name, contact name, address, phone, and email as you would like it to appear on the NAGC State Resource Sheet**

Organization Name \_\_\_\_\_

ATTN: \_\_\_\_\_

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**REMINDER: Please submit with your application:**

1. Letter requesting Affiliation with NAGC
2. Copy of the Bylaws and Mission Statement
3. IRS letter of 501(c)(3) status (if applicable)

**Email, Fax or Mail to:**

**NAGC**  
**ATTN: Affiliate Relationship**  
**1707 L Street, N.W., Suite 550**  
**Washington, DC 20036**  
[ngreen@nagc.org](mailto:ngreen@nagc.org) fax: (202) 785-4248



# NAGC GOVERNANCE POLICY

Policy Manual 10.2

Last Modified: 09/18/07

<b>POLICY TITLE:</b>	<b>State Affiliate Member Services</b>	
<b>RESPONSIBILITY OF:</b>		<b>APPROVED ON: 09/15/07</b>
<b>PREPARED BY:</b>	<b>Green, Burney, Reeves</b>	<b>NEXT REVIEW: 00/00/00</b>
<b>POLICY AREA:</b>	<b>Article X, Section 0, 0.0</b>	

## I. STATEMENT OF PURPOSE

This policy defines the benefits and services afforded to organizations defined as state affiliate members of NAGC, as well as the opportunities for communication and participation by affiliates within the organizational structure.

## II. POLICY STATEMENT

### 1. OVERVIEW:

NAGC may recognize one State Affiliate in each state in order to provide a central point of advocacy and information within that state. With the approval of the Board of Directors, the Association may also grant State Affiliate status to an additional group in any state, provided it meets the criteria specified in the Policy Manual and the group provides additional services beyond those of the existing group to educators and/or families in that state. State Affiliates must be nonprofit organizations and must have documentation of their status including number of members. State Affiliate organizations may not limit membership or services based on race, ethnicity, sex, sexual orientation, or current economic status.

2. As an institutional member, each Affiliate organization pays dues as a multiple of the regular membership fee. Membership in NAGC shall become active upon filing an application, meeting criteria approved by the Board, and payment of initial dues.

3. The benefits available from NAGC that are specific to Affiliates include: a) Access to a state affiliate network online--confidential and restricted to approved state leaders only b) Ability to nominate and recognize an outstanding gifted student through the annual Nicholas Green Awards Program c) Access to key leaders of NAGC to keynote state meetings in return for travel expenses only d) Opportunity to offer eligible parent members a full parent membership in NAGC for a significantly reduced rate e) Access to professional development, members of Congress, and a network of state advocates through the state affiliate

conference held annually in Washington, DC f) Advocacy grants and scholarship funds offered through NAGC g) Consideration of support and partnership regarding regional academies in close proximity

4. General NAGC membership benefits will also be afforded to a designated representative from each state affiliate.

### **III. DEFINITIONS**

**Institutional membership:** Held by a school, library, state affiliate or other similar organization. It does not include the right to vote or hold office. (*ref. Article IV: Membership, 4.1*).

**Affiliate Conference:** Annual Washington, DC based meeting of self identified leaders in each state affiliate who play an active role in leadership and advocacy.