



Schuylkill River Heritage Towns and Tours

“Partnership Form”

INSTRUCTIONS: Distribute this form to your partners and have them read the questions and provide responses for your Heritage Action Plan process. Please refer to “Section 1: Form Useful Partnerships” of the *Schuylkill River Heritage Towns and Tours Toolkit* for guidance. Partners should attach any additional information, if necessary.

NAME OF ORGANIZATION: _____

CONTACT PERSON: _____ **PHONE NUMBER:** _____ **EMAIL:** _____

DATE: _____ (please print the date that this questionnaire was filled-out).

FORM PREPARED BY (NAME/TITLE): _____

ORGANIZATION QUESTIONS

1. Which of the following best describes your organization (please check all that apply)?

<input type="checkbox"/> Private Business or Corporation <input type="checkbox"/> Museum <input type="checkbox"/> Government <input type="checkbox"/> Non-Profit Corporation <input type="checkbox"/> Economic Development/Tourism <input type="checkbox"/> Historical Commission	<input type="checkbox"/> Educational Institution <input type="checkbox"/> Historic Society <input type="checkbox"/> Other (Please Explain) <hr style="width: 100%; border: 0; border-top: 1px solid black; margin-top: 5px;"/> <hr style="width: 100%; border: 0; border-top: 1px solid black; margin-top: 5px;"/>
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2. What is the nature or mission of your organization (please check all that apply)?

<input type="checkbox"/> Historic Preservation <input type="checkbox"/> Economic Development <input type="checkbox"/> Promote Tourism <input type="checkbox"/> Provide Recreation <input type="checkbox"/> Facilitates/Programs <input type="checkbox"/> Conservation <input type="checkbox"/> Education	<input type="checkbox"/> Accommodations <input type="checkbox"/> Restaurant/Lounge <input type="checkbox"/> Sale of Products/Services <input type="checkbox"/> Other (Please Explain) <hr style="width: 100%; border: 0; border-top: 1px solid black; margin-top: 5px;"/> <hr style="width: 100%; border: 0; border-top: 1px solid black; margin-top: 5px;"/> <hr style="width: 100%; border: 0; border-top: 1px solid black; margin-top: 5px;"/>
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3. Is your organization officially recognized? If so, list your organization's officials partners:

4. Does your organization own, operate, and/or maintain a historic site(s)/structure(s)?

Yes (if so briefly describe the site/structure?)

No

If yes, please fill-out the accompanying [Historic Resource Form](#) by following this link.

5. Does your organization conduct special events in the region?

Yes (if so briefly describe those events?)

No

6. Does your organization currently sponsor any interpretive/educational programs or activities related to the region's history, culture, and/or natural resources?

Yes (if so what kind?)

No

7. Does your organization currently provide programs, services, and/or facilities that are used by visitors/tourists to the region?

Yes (if so what kind?)

No

8. Does your organization currently administer programs, services, facilities, and/or funding related to economic development in the region?

Yes (if so what kind?)

No

9. Would your organization be willing to be included in cooperative programs to display and/or interpret information concerning the region's heritage (history and culture)?

Yes (if so what kind?) _____

No

10. By which of the following means might you provide support to promote visitation to the Schuylkill River National Heritage Area region (please check all that apply)?

- Volunteers
- Activity Management/Support
- Interpretive Site/Tours
- Manage Interpretive Facilities
- Financial Support
- Heritage Area Marketing
- Provide Services to Visitors

ATTRACTIONS & RESOURCES QUESTIONS

11. In your opinion, what are the most important assets to attract visitors/tourists to the region (please list and describe)?

12. In your opinion, what are the most important historic, cultural, and/or natural resources to attract visitors/tourists to the region (please list and describe)?

13. In your opinion, what are the most important local assets of your community (town, borough, village, etc.) to attract visitors/tourists to the region (please list and describe)?

ECONOMIC DEVELOPMENT & TOURISM QUESTIONS

14. In your opinion, what is the single greatest challenge to successful economic development and heritage tourism industry in the Schuylkill River National Heritage Area (please describe)?

15. How would you envision your heritage tourism and/or economic development initiatives contributing to the development and promotion of the Schuylkill River National Heritage Area (such as marketing, funding sources, visitor services, heritage resources, etc.)?

16. Do you have any additional input or insights that you feel could assist with heritage tourism initiative?

17. Are there any other individuals, organizations, sites or services that you think should be included in heritage initiatives in the Schuylkill River National Heritage Area?

PARTNERSHIP QUESTIONS

18. Which of the following practices below best describes your organization in regards to partnerships (good, better, best)? _____

PARTNERSHIP ASSESSMENT		
GOOD PRACTICE	BETTER PRACTICE	BEST PRACTICE
• Annually identifies and works with partners.	• Annually identifies and works with partners.	• Annually identifies and works with partners.
	<ul style="list-style-type: none"> • Actively seeks strategic partners to accomplish organizational objectives. • Regularly networks with partners to accomplish specific projects. • Furthering the goals of all partners. 	<ul style="list-style-type: none"> • Actively seeks strategic partners to accomplish organizational objectives. • Regularly networks with partners to accomplish specific projects. • Furthering the goals of all partners.
		<ul style="list-style-type: none"> • Includes partnership planning in an annual business plan. • Governs partnerships with an open and transparent process (high degree of communication).

Please provide a brief description of your organization's practices: _____

19. Which of the following practices below best describes your organization in regards to networking (good, better, best)? _____

PARTNERSHIP ASSESSMENT		
GOOD PRACTICE	BETTER PRACTICE	BEST PRACTICE
<ul style="list-style-type: none"> Identifies colleagues and other partners in like-minded organizations and periodically meets with them to exchange ideas. 	<ul style="list-style-type: none"> Identifies colleagues and other partners in like-minded organizations and periodically meets with them to exchange ideas. 	<ul style="list-style-type: none"> Identifies colleagues and other partners in like-minded organizations and periodically meets with them to exchange ideas.
	<ul style="list-style-type: none"> Seeks affordable networking opportunities throughout the year to exchange ideas and develop partnerships. 	<ul style="list-style-type: none"> Seeks affordable networking opportunities throughout the year to exchange ideas and develop partnerships.
		<ul style="list-style-type: none"> Communicates regularly with members of the community to share ideas on events and concerns. Hosts occasional local or regional networking events. Promotes the organization as an integral member of the community and an important contributor to the community's health, economics, and quality of life.

Please provide a brief description of your organization's networking practices: _____

*This Form and Model Is Offered to Schuylkill River Heritage Area Communities to Assist with Heritage Planning Efforts by
The Schuylkill River National and State Heritage Area/Greenway Association
In collaboration with:*

*The National Park Service, Penn Foundation, the Pennsylvania Department of Conservation and Natural Resources (DCNR), the Department of
Community and Economic Development (DCED), the Pennsylvania Historical and Museum Commission (PHMC), and the Center for Rural
Pennsylvania.*