Chapter Affiliation Requirements (CARE)

Workbook

Table of Contents

WELCOME

Dear Chapter Leader,

Welcome to the Chapter Affiliation Requirements (CARE) online submission form.

The CARE submission consists of questions around the six components of CARE: Board of Directors, Governance, Finance, Membership, Programming, and Communications. Each component will have questions related to the CARE achievement, CARE Plus achievement, and demographics. These questions will be labeled and will appear in the following order for each component.

> **Part 1: CARE Foundational** – A self-reporting assessment evaluating the chapter's achievements of the 2024 CARE elements.

> **Part 2: CARE Plus** –CARE Plus is a collection of best practices, and its purpose is to provide chapter leaders with recognition opportunities, a personalized roadmap to help identify gaps and strengthen chapter operations, flexibility for self-paced growth, formalized processes to address common chapter challenges, and a growth mindset. CARE Plus does not affect a chapter's ability to achieve CARE, and it is recommended that chapters attempt to answer the questions presented. To be CARE Plus achieved, a chapter must complete the required number of items in each category in addition to achieving CARE at the foundational level.

> **Part 3: Demographics** – These questions assist with chapters' ability to benchmark against one another and do not impact CARE achievement.

The CARE submission reports on a chapter's activities during the 2024 calendar year. Even if a chapter doesn't operate on a calendar year basis, as long as the chapter has met CARE during the calendar year, the chapter can base its submission on those accomplishments.

An update for 2024: Previously, chapters were required to maintain a minimum of 20 Power Members (joint chapter/ATD national members) and 35% of their membership as Power Members simultaneously to achieve CARE. This requirement will now be **a CARE Plus element**, where it will be used to determine chapters for recognition rather than being a foundational requirement. Although the joint membership requirement is being removed from the foundational CARE criteria, **activities to promote joint membership will continue to be required**.

The deadline for completing the online CARE survey is January 31, 2025. To qualify for 100 percent completion of CARE, a chapter must complete the online survey by this date. Even if the chapter achieves 100 percent in all elements, submission of the online survey and submission of all specified documentation are required by the deadline to be recognized as a chapter that has achieved 100 percent CARE.

The early deadine for CARE submission is January 17, 2025. Chapters that submit by this deadline will be entered into a raffle to win a prize.

To ensure consistency and accuracy in reporting, chapters are advised to identify and select one leader as your chapter's CARE contact. This person will receive your chapter's unique CARE survey submission link, and is responsible for receiving, reviewing, and appropriately disseminating all CARE news, updates, and requirements to chapter leadership, including completing and submitting the chapter's CARE survey by **January 31, 2025**. However, please note that CARE is and remains the responsibility of the entire board. Use this workbook to compile responses and review their accuracy prior to submission of the online survey.

If you need additional information about CARE, please visit the CARE website at td.org/care or contact your chapter relations manager (CRM).

Thank you for your ongoing time, commitment, and leadership!

ATD Chapter Services Team

GENERAL SURVEY INFORMATION

Chapter Address
This is your chapter's address currently on file with ATD:

Street: _____

Line 2: _____

City: _____

State: _____

Zip: _____

Is the mailing address currently on file with ATD correct?

☐ Yes

☐ No

➢ **If the chapter selects "no," please provide the updated address for the chapter.**

Street: _____

Line 2: _____

City: _____

State: _____

Zip: _____

BOARD OF DIRECTORS: CARE FOUNDATIONAL ITEMS

(Please note: The below items affect a chapter's CARE achievement.)

Chapter submits an incoming 2025 board roster using the Excel template.
Having an accurate board roster for the chapter enables chapter services to share timely and helpful information with chapter leaders. Additionally, chapter leaders included on board rosters receive access to a discounted ATD Professional Plus membership. Please share updates with ATD Chapter Services as changes occur. Please title your document "Chapter Name – 2025 Board Roster" prior to submission.

[File Upload]

The chapter board meets at least once per quarter.

☐ True

☐ False

Chapter board members maintain Power membership (joint chapter/ATD national membership).
Validated by ATD Chapter Services.

- ☐ True
- ☐ False

Chapter maintains written position descriptions for elected members.

- ☐ True
- ☐ False

BOARD OF DIRECTORS: CARE PLUS ITEMS

The chapter provides a defined orientation/onboarding process for incoming board members.

- ☐ True
- ☐ False

If True:

➢ How is the board member onboarding delivered?
- ☐ In-person
- ☐ Virtually
- ☐ Hybrid

➢ What is the approximate frequency of your board member onboarding?
- ☐ Annually
- ☐ As needed
- ☐ Monthly
- ☐ Quarterly

➢ In what month(s) does the board member onboarding occur?
  Select one or more options.
- ☐ January
- ☐ February
- ☐ March
- ☐ April
- ☐ May
- ☐ June
- ☐ July
- ☐ August
- ☐ September
- ☐ October
- ☐ November
- ☐ December

➢ What kind of coaching or mentoring does the chapter provide board members?
- ☐ Board meetings, strategy session, or board retreat has time dedicated to board member coaching or mentoring

- ☐ New board members shadow or attend board meetings prior to the start of their term
- ☐ Onboarding materials made available to incoming positions
- ☐ Outgoing position mentors incoming position
- ☐ President one-on-one
- ☐ President team (president, president elect, or past president)
- ☐ Onboarding materials made available to incoming positions
- ☐ Other

  If "Other," briefly explain what kind of coaching or mentoring during the onboarding process the chapter provides to new board members.

  _____

➢ Who leads the onboarding of new board member(s)?
  - ☐ President
  - ☐ Board member role dedicated to onboarding
  - ☐ Role predecessor
  - ☐ Other

    If "Other," briefly explain who is leading the new board member(s) onboarding.

    _____

The chapter has a succession strategy for identifying and filling board member positions.

- ☐ True
- ☐ False

If True:

➢ Select all that apply.
  - ☐ Has a nominating committee responsible for selecting future board members
  - ☐ Offers opportunities to attend board meetings to educate prospective board members on board activities
  - ☐ Maintains an ongoing list of prospective board members detailing the fit for a specific role and the individual's skills and traits
  - ☐ Has board member dedicated to identifying future board members
  - ☐ Has multiple touch points with prospects to keep them engaged and informed
  - ☐ Other

    If "Other," describe the elements of your succession strategy.

    _____

➢ Does your chapter review its succession plan annually?
  - ☐ Yes

☐ No

The chapter has a volunteer recruitment strategy in place for positions that support the work of the board.

☐ True
☐ False

If True:
➢ The chapter volunteer recruitment strategy includes:
  Select all that apply.
  ☐ Board is structured for succession planning (for instance, Vice President, Assistant, Committee Lead, etc.)
  ☐ Dedicated webpage highlighting opportunities
     o Please provide link_____
  ☐ Position dedicated to coordinating chapter volunteers
  ☐ Targeted outreach to prospective volunteers
  ☐ Volunteer job descriptions
  ☐ Volunteer marketing using the website, social media, and email
  ☐ Volunteer open house
  ☐ Volunteer recruitment goal included in annual goals and strategies (formerly operating plan)
  ☐ Other

  If "Other," describe the elements of your recruitment strategy.

  _____

At least one board member (excluding paid administrators) attends a NAC area call.
Live attendance to be tracked by chapter services.
☐ True
☐ False

The chapter has board member(s) attend the ATD Chapter Leaders Conference (ALC) annually.
Attendance to be confirmed by chapter services.

☐ True
☐ False

The chapter has an advisory board or council that involves past presidents in chapter activities.
☐ True
☐ False

If True:

➢ Identify number of participants and list their names.

_____

_____

_____

_____

The chapter board meets to strategically plan for the future.

- ☐ True
- ☐ False

If True:

➢ When did the chapter board meet to create its strategic plan?

_____

The chapter board submitted a best practice to the SOS program in the past calendar year.

- ☐ True
- ☐ False

If True:

➢ Provide the SOS Title: _____

➢ Provide the SOS Submission Date: _____

BOARD OF DIRECTORS: DEMOGRAPHIC QUESTIONS

When are your chapter board meetings typically held?

- ☐ Monthly
- ☐ Bi-monthly (occurring every two months)
- ☐ Quarterly
- ☐ Other

If "Other," when are your chapter board meetings typically held?

_____

Does your chapter pay for ATD membership dues for one or more chapter board members?

- ☐ Yes
- ☐ No

When do your incoming board members OFFICIALLY begin their terms?

☐ 1st Quarter (January – March)
☐ 2nd Quarter (April – June)
☐ 3rd Quarter (July – September)
☐ 4th Quarter (October – December)

GOVERNANCE: CARE FOUNDATIONAL ITEMS

(Please note: The below items affect a chapter's CARE achievement.)

The chapter creates and submits a 2025 operational plan that includes but is not limited to: annual goals, communication and marketing strategy, recruitment and retention strategy, and succession planning strategy.
*By sharing a copy of your chapter's operating plan, chapter relations managers and members of the National Advisors for Chapters can better support our chapter in achieving its strategic goals. Leverage the Operating Plan Template to create a plan for your chapter. Please title your document **"Chapter Name – 2025 Operating Plan"** prior to submission.*

[File Upload]

The chapter's mission, vision, and bylaws align with those of ATD, and the chapter meets the ATD branding guidelines.

☐ True
☐ False

The chapter complies with federal and state reporting requirements.
Submission of 990/990-N filings to chapter services is required. Requirements vary by state and may differ for incorporated versus non-incorporated chapters.

☐ True
☐ False

The chapter members participate in the nomination and election of the chapter board.

☐ True
☐ False

GOVERNANCE: CARE PLUS ITEMS

The chapter board maintains and updates its Standard Operating Procedures (SOPs) annually or as needed throughout the year.

☐ True
☐ False

If True:

➢ Which of the following do your SOPs include?
Select all that apply.
- ☐ CARE Requirements
- ☐ Chapter Background
- ☐ Conflict of Interest Policy
- ☐ Election of Officers
- ☐ Job Descriptions
- ☐ Mission & Vision
- ☐ Organizational Chart
- ☐ Past Presidents
- ☐ Policies and Procedures
- ☐ Strategic Goals
- ☐ Other

If "Other," please explain what additional items are included in your chapter's SOPs.

_____

The chapter board reviews its bylaws annually, including a review of the bylaws as part of board member onboarding.

- ☐ True
- ☐ False

If True:

➢ Provide the date that bylaws were last reviewed.

_____

The chapter makes board meeting minutes or summaries available to members.

- ☐ True
- ☐ False

If True:

➢ How are board meeting minutes or summaries made available to members?
Select all that apply.
- ☐ Posted publicly on website
  - o Please provide link. _____
- ☐ Posted on website to members only
- ☐ Emailed upon request
- ☐ Included in newsletter
- ☐ Other

If "Other," please explain additional ways the chapter makes board meeting minutes or summaries available to members.

_____

The board maintains a central repository or document library for archiving important chapter documents.

- ☐ True
- ☐ False

If True:

- ➢ What system does the chapter use as a central repository or document library for archiving important chapter documents?
  Select all that apply.
  - ☐ Basecamp
  - ☐ Box
  - ☐ Dropbox
  - ☐ Google Drive
  - ☐ One Drive
  - ☐ SharePoint
  - ☐ Wild Apricot
  - ☐ Other

    If "Other," please list the platform the chapter is using.

    _____

GOVERNANCE: DEMOGRAPHIC QUESTIONS

What types of insurance coverage does your chapter have?
Select all that apply.
- ☐ Directors and Officers liability insurance
- ☐ Event-based insurance coverage
- ☐ General liability
- ☐ Professional liability

Is your chapter incorporated?
Maintaining accurate and up-to-date information about your chapter's EIN, tax-exempt status, and incorporation status is a best practice that can prevent the chapter from encountering costly legal issues in the future. To determine if your chapter is incorporated, visit your Secretary of State's website, and use the business entity search function.

- ☐ Yes
- ☐ No

FINANCE: CARE FOUNDATIONAL ITEMS

(Please note: The below items affect a chapter's CARE achievement.)

The chapter board develops an annual operating budget and makes it available to members.

☐ True

☐ False

Chapter submits its most recent balance sheet and income statement through the survey submission site by January 31, 2025.

☐ True

☐ False

If True:

➢ Please provide the chapter's total income for 2024:

_____

➢ Please provide the chapter's total expenses for 2024:

_____

➢ Please provide the chapter's total liabilities and equity as of December 31, 2024:

_____

Most Recent Income Statement showing projected and actual numbers.
*A brief explanation of any loss or gain should be provided. Chapter submits its year-end profit and loss statement. Leverage the income statement template. Please title your document **"Chapter Name – 2024 Income Statement"** prior to submission.*

[File Upload]

Most Recent Yearly Balance Sheet
*Chapter submits its balance sheet as of December 31, 2024. Leverage the balance sheet template available. Please title your document **"Chapter Name – 2024 Balance Sheet"** prior to submission.*

[File Upload]

Chapter board has an internal or external financial review completed annually by a person or group not directly responsible for the management of chapter finances.

☐ True

☐ False

Employer Identification Number (EIN)
Please note the below will be auto-populated by chapter services for review.

_____

Please confirm the above EIN listed is accurate.

☐ True

☐   False

If not correct, please provide the chapter's correct EIN: _____

FINANCE: CARE PLUS ITEMS

The chapter has approximately three (3) to six (6) months of operating expenses set aside for emergency situations.
Should be noted on submitted financial statements.

☐   True
☐   False

The chapter board completes a risk assessment and reviews it annually.
☐   True
☐   False

If True:

➢   Submit your chapter's risk assessment.
    Leverage the <u>risk assessment template</u> *if needed. Please title your document* **"Chapter Name – 2024 Risk Assessment** *prior to submission.*
        [File Upload]

The chapter budgets to send board members to the ATD Chapter Leaders Conference (ALC) or covers the cost of ATD membership.
Should be noted as a budget item on submitted financial statements.

☐   True
☐   False

If True:
➢   How many chapter leaders are budgeted to attend ALC in 2025?

_____

The chapter has a partnership strategy that identifies, recruits, and maintains partnerships to support chapter programming and operations.
Note: Partners typically provide support or services outside of funds.

☐   True
☐   False

If True:

➢   Please select the type of partner(s) the chapter works with.
    ☐   Other ATD Chapter(s)
    ☐   Higher Education
    ☐   Content Provider or LMS

☐ Other Professional Association(s)

☐ Business(es) or Non-Profit(s)

☐ Other

If "Other," please provide the type or name of partner(s):

_____

_____

The chapter has sponsors to support chapter programming and operations.

☐ True

☐ False

If True:

➢ Please select the type of sponsor(s) the chapter works with.

☐ Local Business(es)

☐ Higher Education

☐ Learning or Consulting Agency

☐ Content Provider or LMS

☐ Other

If "Other," please provide a list with the type or name of chapter sponsors.

_____

_____

FINANCE: DEMOGRAPHIC QUESTIONS

Does your chapter pay for any administration help, such as a management firm, or other administrative service?

☐ Yes

☐ No

➢ If "yes," please provide the following:

Administrative Contact Name _____

Administrative Company _____

Please provide the contact information for your chapter's administrative help below.

Street: _____

City: _____

State: _____

Zip: _____

Financial contact email for all ATD payment notifications.
ATDs financial system allows for one main contact for all financial payment notifications. Please provide the email of who that contact will be for 2025. We recommend using an evergreen email, such as *finance@chaptername.com*

_____

MEMBERSHIP: CARE FOUNDATIONAL ITEMS

(Please note: The below items affect a chapter's CARE achievement.)

2024 Chapter Membership Roster as of 12/31/24

Chapter submits year-end membership roster using the Excel template.*

*Collecting chapter membership rosters allows chapter services to maintain a historical record of chapter membership. Please title your document **"Chapter Name – 2024 Membership Roster"** prior to submission.*

*Chapters participating in the Wild Apricot (WA) partnership program do not have to upload their current chapter membership roster. Chapter services can pull that for you if you have provided Chapter Services with "Full Administrative Rights" access to your account (required for all chapters participating in the WA discount partnership program). For your reference, the username should match below:

Username: chapters@td.org

For more information on providing "Full Administrative Rights," please visit the Wild Apricot help page on setting up administrators.

[File Upload]

The chapter board assesses its members' needs and satisfaction levels at least once per year.
- ☐ True
- ☐ False

The chapter completes 10 joint membership activities of the chapter's choice.
For support, review the joint membership activities job aid.

- ☐ True
- ☐ False

If True:

➢ Please select all joint membership activities that the chapter completed in 2024.
   Select all that apply.
   - ☐ Mentions Power membership at the beginning of each chapter event
   - ☐ Uses PowerPoint slides at each event highlighting Power membership
   - ☐ Has printed Power member collateral displayed at each event
   - ☐ Participates in the Chapter membership on the ATD Store Program
   - ☐ Participates in ATD Member Week by offering a 10 percent discount on its membership
   - ☐ Shares best practices on joint membership with chapter leaders by presenting on NAC area calls, submitting an SOS, or presenting at ALC

- ☐ Features a Power member section in the chapter newsletter
- ☐ Displays Power member logos on chapter website
- ☐ Has Power member testimonials on website, in the chapter newsletter, and at meetings
- ☐ Posts Power member messages on social media
- ☐ Promotes Power membership at SIG and GIG meetings
- ☐ Requests list of ATD members quarterly to identify prospects
- ☐ Requests joint membership percentage from your CRM quarterly
- ☐ Promotes Power membership at chapter conference(s)
- ☐ Promotes Power membership at chapter special event, including an information table with both chapter and ATD materials
- ☐ Creates a group or corporate Power membership structure
- ☐ Discusses Power membership at each board meeting
- ☐ Conducts a membership drive
- ☐ Holds a program on the value of membership
- ☐ Conducts new member orientations
- ☐ Holds an event to recruit ATD members to chapter membership
- ☐ Publicizes the special "Power member" rate (Professional: $269 or Professional Plus: $449 for chapter members)
- ☐ Hosts a Power member page on chapter website
- ☐ Highlights Power membership in chapter emails
- ☐ Sends a targeted email to prospective members promoting Power membership once a quarter
- ☐ Other

    If "Other," please provide a brief description of your activities.

    _____

- ☐ None of the above

MEMBERSHIP: CARE PLUS ITEMS

The chapter has a member/volunteer recognition or spotlight program.

- ☐ True
- ☐ False

If True:

➢ **How does the chapter provide recognition?**
  Select all that apply.
- ☐ Hosts an appreciation event
- ☐ Provides an award or gift
- ☐ Recognizes at an in-person event

☐ Reserves a section in the newsletter
☐ Spotlights on the chapter website or social media
☐ Other

If "Other," describe other ways the chapter provides recognition.

_____

The chapter offers a job board, consultant referral service, resume workshop, or other service(s) not included in your chapter's member benefits.

☐ True
☐ False

If True:

➢ What service does your chapter offer?
Select all that apply.
☐ Consultant referral services
☐ Job board
☐ Resume review workshop
☐ Other
If "Other," please explain. _____

The chapter hosts an orientation for new members.
☐ True
☐ False

If True:

➢ How is the new member onboarding delivered?
☐ In-person
☐ Virtual
☐ Hybrid

➢ What is the program frequency?
☐ Monthly
☐ Quarterly
☐ Twice a year
☐ Annually
☐ On-demand
☐ Other
If "Other," please describe _____

➢ What content is included in the onboarding?
Select all that apply.
☐ ATD overview

- ☐ Chapter background
- ☐ Overview of events
- ☐ Member benefits
- ☐ Power Membership
- ☐ Volunteer opportunities
- ☐ Other
  If "Other," please describe _____

The chapter tracks the retention rate of its members and determines a target retention rate to meet annually. *(End Count – New Members) ÷ Start Count = Retention Rate*

- ☐ True
- ☐ False

If True:

- ➢ Provide your chapter's average retention rate: _____

The chapter makes its membership available on the ATD Store.
The response has been prepopulated per ATD's records.

- ☐ True
- ☐ False

Do you agree with the data listed above?
- ☐ Yes
- ☐ No
  If No, please provide further explanation _____

The chapter creates awareness about volunteering for the chapter and open positions.
- ☐ True
- ☐ False

If True:

- ➢ Volunteer recruitment resources include:
  Select all that apply.
  - ☐ Announcements at chapter events
  - ☐ Dedicated webpage with open volunteer positions
    - o Provide webpage link _____
  - ☐ Volunteer job descriptions
  - ☐ Volunteer fair/event
  - ☐ Volunteer marketing through social media and email.
  - ☐ Webinar
  - ☐ Other

If "Other," please explain _____

The chapter achieves a joint chapter/ATD membership rate of 35 percent or higher while meeting the 20 joint member minimum.
To be confirmed by chapter services.

- ☐ True
- ☐ False

The chapter identifies those activities having the most impact on its joint membership rate.

- ☐ True
- ☐ False

  If True:
- ➢ What are the activities that have the most impact on the joint membership rate for the chapter?
  _____

The chapter holds a defined initiative or campaign to recruit prospective members.
Note: The campaign should not include giving away chapter membership to prospects.

- ☐ True
- ☐ False

MEMBERSHIP: DEMOGRAPHIC QUESTIONS

What was your chapter's average membership number for 2024?
To be reviewed by chapter services.

_____

Did your chapter raise dues in 2024?

- ☐ Yes
- ☐ No

  If yes, how much were dues raised?

  _____

Did your chapter lower dues in 2024?

- ☐ Yes
- ☐ No

  If yes, how much were dues lowered? _____

Does your chapter plan to raise dues in 2025?

☐ Yes

☐ No

If yes, what will the chapter's new individual or regular membership dues be?

_____

What are your chapter's current dues?

_____

Which of the following dues categories does your chapter have?
Select all that apply.

☐ Group/Corporate member
  o How much are your corporate or group membership dues per member?

  _____

☐ Senior member
  o How much are your senior membership dues?

  _____

☐ Student member
  o How much are your student membership dues?

  _____

  o How many student members does your chapter have?

  _____

  o Which of the following are requirements for a student to qualify for a chapter student membership rate?
    Select all that apply.
    ☐ Attend an accredited university or college
    ☐ Demonstrate they are taking classes in a talent development-related field
    ☐ Demonstrate they are in a degree program in a talent development-related field
    ☐ Take a minimum number of credit hours
      o Please enter the number of credit hours.
      _____

    ☐ None of the above
      o Please provide criteria. _____

☐ Young professional member
  o How much are your young professional membership dues?

_____

☐ Other
- o Please list additional dues categories.

_____

- o How much are your current membership dues for the additional membership category?

_____

Does your chapter provide ATD members a discount on chapter membership?
☐ Yes
☐ No
- ➢ If yes, what is the percent of your discount?

_____

CHAPTER MEMBERSHIP ON THE STORE

Is your chapter on the ATD Store?

☐ Yes
☐ No

If Yes:
➢ What is your Chapter membership on the Store Contact **Name**?
Each chapter can have **one** contact who will receive an immediate notification when a new member joins the chapter and the weekly member roster. Please provide the first and last name of who the chapter would like to have as the contact in 2025.

_____

➢ What is your Chapter membership on the Store Contact **Email**?

_____

➢ What types of membership do you offer on the store?
☐ Individual or Regular
- o Please confirm the correct individual or regular membership price for 2025.

_____

☐ Senior
- o Please confirm the correct senior membership price for 2025.

_____

☐ Student
  o Please confirm the correct student membership price for 2025.

  _____

☐ Young Professional
  o Please confirm the correct young professional membership price for 2025.

  _____

If No:
➢ Would you be interested in joining the ATD Store in 2025?

☐ Yes
☐ No

If Yes, please provide:

  o Name: _____

  o Email: _____

  o Phone Number: _____

➢ What email addresses should receive the chapter's monthly sales report?
  Each month, the chapter receives a monthly report that includes all chapter memberships purchased during that month. Please provide the email addresses of any board members who should receive the monthly sales reports. We recommend using an evergreen email, such as finance@chaptername.com.

  _____

PROGRAMMING: CARE FOUNDATIONAL ITEMS

(Please note: The below items affect a chapter's CARE achievement.)

The chapter provides at least six (6) professional development activities per year for members.
Examples: webinars, dinner programs, networking, monthly events, etc.

☐ True
☐ False

PROGRAMMING: CARE PLUS ITEMS

The chapter offers a mentoring program or initiative for its members.

- ☐ True
- ☐ False

  If True:
  - ➢ How long is your program? _____
  - ➢ How many mentees did you have? _____
  - ➢ How many mentors did you have? _____

The chapter utilizes ATD's Talent Development Capability Model™ in program development.
- ☐ True
- ☐ False

  If True:
  - ➢ Select the Capabilities used:
    Select all that apply.
    - Building **Personal** Capability
      - ☐ Communication
      - ☐ Emotional Intelligence and Decision Making
      - ☐ Collaboration and Leadership
      - ☐ Cultural Awareness and Inclusion
      - ☐ Project Management
      - ☐ Compliance and Ethical Behavior
      - ☐ Lifelong Learning
    - Developing **Professional** Capability
      - ☐ Learning Sciences
      - ☐ Instructional Design
      - ☐ Training Delivery and Facilitation
      - ☐ Technology Application
      - ☐ Knowledge Management
      - ☐ Career and Leadership Development
      - ☐ Coaching
      - ☐ Evaluating Impact
    - Impacting **Organizational** Capability
      - ☐ Business Insight
      - ☐ Consulting and Business Partnering
      - ☐ Organization Development and Culture
      - ☐ Talent Strategy and Management
      - ☐ Performance Improvement
      - ☐ Change Management
      - ☐ Data and Analytics
      - ☐ Future Readiness

The chapter hosts MORE THAN six professional development events each year.
Includes Special Interest Group (SIG)/Geographic Interest Group (GIG) events, webinars, etc.

☐ True

☐ False

If True:

➢ How many in-person professional development events did the chapter hold in 2024?

_____

➢ How many networking events did the chapter hold in 2024?

_____

➢ How many Special Interest Group (SIG) events did the chapter hold in 2024?

_____

➢ How many Geographic Interest Group (GIG) events did the chapter hold in 2024?

_____

➢ How many webinar events did the chapter hold in 2024?

_____

The chapter hosts or partners with other local chapters to host a conference for its members and prospects.

☐ True

☐ False

If True:

➢ When did the chapter's conference take place?

_____

➢ What was the conference theme?

_____

➢ How many people attended the conference?

_____

➢ What ATD chapters, if any, did the chapter partner with on the conference?

_____

The chapter offers its own study groups for the Associate Professional in Talent Development (APTD®) or Certified Professional in Talent Development (CPTD®).

☐ True

☐ False

If True:

➢ What type of study group does the chapter offer?
Select all that apply.

☐ APTD

o On average, how many study groups did your chapter run in 2024?
_____

o What is the average number of participants per study group?
_____

☐ CPTD

o On average, how many study groups did your chapter run in 2024?
_____

o What is the average number of participants per study group?
_____

The chapter hosts its own awards program.

☐ True
☐ False

If True:

➢ What awards categories do you provide?

☐ Company
☐ Consulting
☐ Individual
☐ Internship
☐ Professional Achievement
☐ Non-profits
☐ Work teams
☐ Other

If "other", please list the categories of the chapter's awards program:
_____

The chapter collaborates with other chapters to plan and host joint programming.

☐ True
☐ False

If True:

➢ When did the joint program take place?

_____

➢ How many people attended the joint program?

_____

➢ What ATD chapter(s) did the chapter partner with on the program?

_____

PROGRAMMING: DEMOGRAPHIC QUESTIONS

When are the majority of your regular programs held?

- ☐ Morning
- ☐ Lunchtime
- ☐ Afternoon
- ☐ Evening
- ☐ Other

If "Other," please explain: _____

In-Person Programming Data

What is the average attendance at your regular in-person chapter meeting?

_____

What is the approximate registration fee for a chapter member to attend an in-person chapter program?

_____

What is the approximate registration fee for a non-member to attend an in-person chapter program?

_____

What is the approximate registration fee for a chapter member to attend an in-person chapter-sponsored conference?

_____

What is the approximate registration fee for a non-member to attend an in-person chapter-sponsored conference?

_____

Virtual Programming Data

What is the average attendance at your regular virtual chapter meeting?

_____

What is the approximate registration fee for a chapter member to attend a virtual chapter program?

_____

What is the approximate registration fee for a non-member to attend a virtual chapter program?

_____

What is the approximate registration fee for a chapter non-member to attend a virtual chapter-sponsored conference?

_____

What is the approximate registration fee for a non-member to attend a virtual chapter-sponsored conference?

_____

Do you have any Special Interest Groups (SIGs)?

☐ No

☐ Yes

If yes, what is the focus of your SIG(s)?

_____

COMMUNICATION: CARE FOUNDATIONAL ITEMS

(Please note: The below items affect a chapter's CARE achievement.)

The chapter maintains a current website with up-to-date information.

☐ True

☐ False

The chapter disseminates a communication piece to members at least once per quarter that includes chapter and ATD programs and initiatives.

☐ True

☐ False

The chapter board shares the following information with members at least once per year: membership numbers, financial performance, and progress toward annual goals.
The format can be a formal report, video, infographic, table tents at events, newsletter article, or others.

☐ True

☐ False

Board members hold, at minimum, an annual phone call with their chapter relations manager to identify opportunities for support.

The response has been prepopulated per ATD's records.

☐ True

☐ False

Do you agree with the data listed above?

☐ Yes

☐ No

   If no, please provide a further explanation.

   _____

COMMUNICATION: CARE PLUS ITEMS

The chapter communicates with its membership about non-programming information. This can be included in a blog, video blog (vlog), newsletter, or other format.

☐ True

☐ False

   If True:

   ➤ What does the chapter use?
     Select all that apply.

     ☐ Blog

     ☐ Email

     ☐ Facebook page

     ☐ Instagram

     ☐ LinkedIn group

     ☐ Newsletter

     ☐ Video blog

     ☐ Twitter

     ☐ YouTube

     ☐ TikTok

     ☐ Slack

     ☐ Other

        If "Other," explain what other communication tools does the chapter use?

        _____

The chapter has a targeted communication strategy and plan (including social media) to communicate with chapter prospects and members.

☐ True
☐ False

The chapter provides a members-only section through the chapter's website or social media platforms.

☐ True
☐ False

If True:

➢ Select what information is provided behind the member gateway or social medial channels used.
Select all that apply.

☐ Board meeting minutes
☐ Event materials
☐ Governance documents
☐ Job board
☐ Member directory
☐ Mentoring
☐ Other

If "Other," provide a brief description of what information is provided behind member-gateway or social media channels used?

_____

The chapter participates in and promotes Employee Learning Week (ELW).

☐ True
☐ False

If True:

➢ What did your chapter do to support Employee Learning Week?
Select all that apply.

☐ Hosted a themed event
☐ Organized an awards program
☐ Received a state proclamation
☐ Organized a relevant communications plan
☐ Hosted a webinar
☐ Other

If "Other," please describe:

_____

COMMUNICATION: DEMOGRAPHIC QUESTIONS

Which of the following does your chapter have?
Select all that apply.

- ☐ Facebook
    - o What is your Facebook link? _____
- ☐ Instagram
    - o What is your Instagram username? _____
- ☐ LinkedIn group
    - o What is your LinkedIn group name? _____
- ☐ Snapchat
    - o What is your Snapchat username? _____
- ☐ TikTok
    - o What is your TikTok username? _____
- ☐ Twitter
    - o What is your Twitter username? _____
- ☐ YouTube
    - o What is your YouTube username? _____
- ☐ Blog
    - o What is your Blog url? _____
- ☐ Other
    - o What other social media does your chapter have?
      _____
- ☐ None of the above