The Department of Education and the <insert TA program/project title (e.g. RSN)> are committed to providing quality technical assistance (TA) services. Please take a few minutes to provide feedback about your experience to help us improve future TA and understand how TA benefits each State/Grantee.

**Title:** *<insert pre-printed information>*

**TA Date/Location:** *<insert pre-printed information>*

**Goals and Anticipated Outcomes of TA:**

* *<insert pre-printed information>*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Please indicate your agreement with the following statement regarding this TA.** | **Strongly Disagree** | **Disagree** | Neither Agree nor Disagree | **Agree** | **Strongly Agree** |
| 1. The knowledge and skills of <insert expert provided> were appropriate for the goals of this TA. *(repeat for up to 4 experts, if needed)* | 1 | 2 | 3 | 4 | 5 |
| 1. As a result of this TA, I am able to <insert goal #1>. *(repeat for up to 4 concrete goals)* | 1 | 2 | 3 | 4 | 5 |
| 1. The content of this TA was appropriate for meeting the TA goals. | 1 | 2 | 3 | 4 | 5 |
| 1. The knowledge and/or skills I acquired through this TA are directly applicable to my work. | 1 | 2 | 3 | 4 | 5 |
| 1. The format of the event provided ample opportunity and encouragement for participants to meaningfully interact with others. <*optional*>. | 1 | 2 | 3 | 4 | 5 |
| 1. I will share the knowledge and/or skills I learned in this TA with others. | 1 | 2 | 3 | 4 | 5 |
| 1. This TA built our capacity to move forward on our <insert topic (e.g., education reform)> goals. | 1 | 2 | 3 | 4 | 5 |
| 1. I was satisfied with the overall quality of the TA materials (handouts, audiovisuals, etc.) <*optional*>. | 1 | 2 | 3 | 4 | 5 |
| 1. I am satisfied with the overall quality of this TA experience. | 1 | 2 | 3 | 4 | 5 |

1. What aspects of this TA were most useful and relevant for your work and why?

1. How would you suggest changing future similar events to make them more useful for participants?

1. As a result of the TA received, our State/program took the following action steps (e.g., actions or changes in policy, practice, procedures, or programming). OR How do you plan to apply the information from this TA to your work in < insert topic (e.g., education reform)>?

1. What additional TA would you like to see in the future?

1. (Optional) Please identify your State:
2. (Optional) Please indicate your Grantee related role: <insert response choices if appropriate>

**These are optional statements and questions that can be added to the generic feedback form to address the specifics of a particular mode of TA being provided.** For all questions referencing the particular [State/program], [State/project], or [State/grantee, specific language may be substituted to reference the particular program and/or grantee (i.e. State, District, grantee) for which the grantee is giving feedback**. It is expected that each final TA feedback form will be no longer than the front and back of one page or 20 questions, whichever is shorter, with a burden of no more than 3-5 minutes per respondent.**

**Optional Questions:**

**Webinars/conference calls:**

* Additional agreement statements for webinars that can be added to the generic TA feedback form as needed:

1. The technology provided an effective learning environment.
2. The webinar has increased my knowledge about <insert topic>.
3. The webinar has increased my practical skills <insert topic>.
4. The format of this TA was appropriate for meeting the TA goals.
5. I was satisfied with the overall quality of the facilitation.

* Additional open-ended response questions for webinars that can be added as needed:

1. How can the event be more interactive in a way that would be useful and informative to you?
2. What additional TA topics would be useful for your State/program and appropriate for the webinar format?

**Meetings/Conferences/Convenings:**

* Additional agreement statements for meetings/conferences/convenings that can be added to the generic TA feedback form as needed:

1. This interactive format of bringing together multiple actors from my State/program/district was beneficial towards increasing collaboration, coordination and communication amongst our State/project team.
2. The topics covered in this convening will help my State/project achieve its < insert topic (e.g., education reform)>?
3. The registration and logistics information were clear, helpful, and easily accessible.
4. The meeting space and/or technology provided a good learning environment.
5. Please rate the usefulness of the following sessions, using a 1 to 4 scale where a rating of 1 means “not useful” and 4 means “very useful.” *<list sessions and provide room for comment>*
6. Attending this TA event was a good use of my time.
7. The format of this TA was appropriate for meeting the TA goals.
8. I found the pre-work to be helpful in preparing me for this convening.
9. I was satisfied with the overall quality of the facilitation. (Strongly Disagree – Strongly Agree)

* Additional open-ended response questions for meetings/conferences/convenings that can be added as needed:

1. How can the format of the event be improved for future convenings in a way that is useful and informative to you?
2. Was the format of the participant materials (agendas, PowerPoint slides, resources) helpful to you? Do you have any recommendations for making the materials more user-friendly?
3. Was <*insert title of activity of interest*> helpful? If so, why; if not, what would be more helpful?
4. What are the action steps that your State/project team is planning to implement as a result of this convening?
5. What would be most useful at future convenings/meetings (check up to three):
   * More time to discuss with our State/project teams on our own.
   * More time to discuss with similar roles in other States/with other grantees.
   * More time to interact as State/project teams with our peer States/grantees.
   * More time hearing from experts.
   * More facilitated discussion time within our State/project teams.
   * More concrete tasks that will help us in moving our State/project forward as a team.
   * A specific topical focus on (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
   * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Individualized TA:**

* Additional agreement statements for individualized TA that can be added to the generic TA feedback form as needed:

1. This individualized TA experience is useful for helping my State/project achieve its < insert topic (e.g., education reform)>?goals.
2. The TA coordinator was responsive, detail oriented and thorough in planning.
3. I was satisfied with the overall planning and support of the event by the <insert TA project name>.
4. The ITA support provided helped to improve practice in the <SEA, LEA, project, etc>
5. As a result of this ITA, my State/project has built the capacity to continue moving this work forward.
6. I was satisfied with the overall quality of the facilitation.

* Additional open-ended response questions for individualized TA that can be added as needed:

1. As a result of the TA received, our State/project will take the following action steps (for example, actions or changes in policy, practice, procedures or programming):
2. What could the <TA project (e.g, RSN)> have done differently to help you plan better for the TA?
3. On a scale of 1 to 5, with 1 representing “very dissatisfied” and 5 representing “very satisfied,” how satisfied are you with the quality of the expert(s)’s work in achieving the expected outcomes for the TA? Please explain.
4. What obstacles or challenges, if any, did you encounter during the delivery of the TA? Do you have any suggestions for improving delivery of future TA?

* For individualized TA that does not end up being implemented for whatever reason, we will not use the generic form above in order to minimize participant burden. Instead, the coordinator will ask the following two questions at the conclusion of the TA:

1. Were you satisfied with the initial planning and supports provided by the <TA project (e.g, RSN)>?
2. Do you have any suggestions for improving future TA?

**Community of Practice/Working Groups/Learning Community:**

* Additional agreement statements for CoP/Working Groups/Learning Communities that can be added to the generic TA feedback form as needed:

1. My participation in this <CoP/Working Group/Learning Community> is useful for helping my State/project achieve its < insert topic (e.g., education reform)> goals.
2. The CoP/Working Group/Learning Community facilitator is engaging, responsive and helpful in moving the work forward.
3. The structure of the CoP/Working Group/Learning Community activities makes my participation not overly burdensome.
4. The CoP/Working Group/Learning Community activities are appropriate and helpful for members.
5. I was satisfied with the overall support of the CoP/Working Group/Learning Community by the the <TA project (e.g, RSN)>.
6. I was satisfied with the overall quality of the facilitation.

* Additional open-ended response questions for CoP/Working Groups/Learning Communities that can be added as needed:

1. As a result of my participation in the CoP/Working Group/Learning Community, our State will take the following action steps (for example, actions or changes in policy, practice, procedures or programming):
2. Is the format of the CoP/Working Group/Learning Community activities appropriate for the intended goals?
3. What activities would be more helpful in achieving the goals of the group?
4. On a scale of 1 to 5, with 1 representing “very dissatisfied” and 5 representing “very satisfied,” how satisfied are you with the quality of the expert(s) assisting your CoP/Working Group/Learning Community? Please explain.
5. Does the CoP/Working Group/Learning Community contain the right mix of membership? What types of additional members would be appropriate (for example, expertise, roles, State)

**Trainings:**

* Additional agreement statements for trainings that can be added to the generic TA feedback form as needed:

1. I understand/can identify *<insert learning objective content here>*.
2. The materials and information were appropriate for my level of experience and knowledge.
3. The training has increased my knowledge about <insert topic>.
4. The training has increased my practical skills regarding <insert topic>.
5. The format of this training was appropriate for meeting the TA goals.

* Additional open-ended response questions for trainings that can be added as needed:

1. How can the event be more interactive in a way that would be useful and informative to you?
2. What additional trainings would be useful for your State/project?
3. Was the format of the participant materials (text, PowerPoint slides, resources) helpful to you? Do you have any recommendations for making the materials more user-friendly?
4. Was/Were <*insert title of each interactive activity*> and <*insert title of each activity*> helpful? If so, why, and if not, how can they be improved? *(pick one or two appropriate training activities)*
5. Identify **three** things you plan to do or change as a result of the training you received. Please be as specific as you can (for example, actions or changes in policy, practice, procedures or programming).

Public Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 4 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is voluntary. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Education, 400 Maryland Ave., SW, Mailstop L-OM-2-2E319, Washington, DC 20202 or email ICDocketMgr@ed.gov and reference the OMB Control Number 1880-0542. Note: Please do not return the completed Customer Feedback Form to this address.