

## General T/TA Event Form

You are logged in as Western and Pacific CW Implementation Center (WPIC)

OMB Number: (0970-0377)

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### Date Entered:

Definition: General T/TA Event is T/TA made available to multiple States and Tribes for training, information sharing, peer networking, or dissemination. These may be one-time or regularly scheduled events. The events usually are targeted to a particular group of recipients that share a professional role or an interest in a topic or issue. Examples include webinars, conference presentations, and regional meetings. General T/TA events differ from T/TA activities because events are not tailored to the needs of a specific State or Tribe and are not provided as a part of an IP or a Work Plan in response to a specific T/TA request.

Items with an asterisk after the label are required.

**Short Title\*\*:**

**Narrative Description of T/TA Event\*\*:**

0 characters (6000 max)

**Targeted Participants\*\*:**

*(e.g., state CW agency directors, Tribal workers, adoption managers, county or local directors, foster care supervisors, family court judges, private agencies operating on behalf of the State, etc.)*

**Start Date\*\*:**   **Start Time\*\*:**  (HH:MM Eastern Time)  AM  PM

**End Date\*\*:**   **End Time\*\*:**  (HH:MM Eastern Time)  AM  PM

### Duration of Event\*\*:

*(Enter either Days or Hours, but not both)*

**Total # Days\*\*:**  *(Round to the nearest half day)*

**Total # Hours\*\*:**  *(Round to the nearest half hour)*

### Members of the T/TA Network Involved in T/TA Event (including your Center)\*\*

Select Network Member(s)

- AdoptUsKids
- NRC for Adoption (NRCA)
- NRC for Child Protective Services (NRCCPS)
- NRC for Child Welfare Data and Technology (NRC-CWI)
- NRC for Community-Based Child Abuse Prevention (NR

Click to ADD >>

<< Click to REMOVE

Added Network Member(s)

- 

### Lead Contact Person\*\*:

**Name\*\*:**

**Email\*\*:**

**Phone\*\*:**

**Extension:**   
*(XXX-XXX-XXXX)*

**Registration URL/Web Address:**

**Dial-in Number:**

**Participant Code:**

**If in-person, location of general T/TA Event:**

**Mode of contact\*\*:**

**Other (Specify):**

### Type(s) of T/TA\*:

Select Type(s) of T/TA

- Training
- Coaching
- Training of Trainers
- Dissemination of information
- Consultation/problem solving/discussion

Click to ADD >>

<< Click to REMOVE

Added Type(s) of T/TA

- 

**Other (Specify):**

**Practice Area(s)\*:**

Select Practice Area(s)

- General
- Primary CA/N Prevention
- Secondary CA/N Prevention
- CPS Referral and Intake
- Assessment of Safety and Risk

Click to ADD >>  
 << Click to REMOVE

Added Practice Area(s)

Other (Specify):

**Organizational/Systemic Area(s)\*:**

Select Organizational/Systemic Area(s)

- Practice Model
- Mission/Vision/Principles
- Policies & Procedures
- Leadership Decision-making/Practice
- Management/Administrative Decision-making/Practice

Click to ADD >>  
 << Click to REMOVE

Added Organizational/Systemic Area(s)

Other (Specify):

**T/TA Direct Recipient\*:**

Select T/TA Direct Recipient(s)

- Agency: Administrative Leadership (director/deputies)
- Agency: Middle Managers (program/division heads)
- Agency: Training Department/Division
- Agency: Supervisors
- Agency: Case Workers/ Direct Practice Workers

Click to ADD >>  
 << Click to REMOVE

Added T/TA Direct Recipient(s)

Other (Specify):

**Specific Category:**

Choose NRC/IC:

Select Category

Click to ADD >>  
 << Click to REMOVE

Added Category

Other (Specify):

**Peer-to-Peer: Is this a peer networking event?\***  Yes  No

**Did any peers participate as providers in this event?\***  Yes  No

**Peer T/TA Providers:**

**Total number of participants (targeted by NRC/IC)\*:**

**Participating Jurisdictions Represented:**

Select State/Tribes/Territories

- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas

Click to ADD >>  
 << Click to REMOVE

Added State/Tribes/Territories

**Will the T/TA event support implementation of one or more provisions of the Fostering Connections to Success and Increasing Adoptions Act of 2008?\***  Yes  No

**General T/TA Event Entered By:**

**Optional Code:**

**Optional Code:**

**Is this General T/TA event complete and is the form ready for closeout?:**  Yes  No

\*\* required before saving the form and moving on.  
\* required before closeout.