# Webinar #1- Law Enforcement Network:

# Introduction to the NIOT/COPS Office Initiative

1) How would you rate the following in reference to this webinar?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **5**  **Excellent** | **4**  **Good** | **3**  **OK** | **2**  **Fair** | **1**  **Poor** |
| a. Usefulness of information presented |  |  |  |  |  |
| b. Usefulness of resources presented |  |  |  |  |  |
| c. Effectiveness of discussion |  |  |  |  |  |

2) Has participating in this webinar provided you with the following?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Yes, very**  **much** | **Yes, somewhat** | **No, didn’t make a difference** | **Not applicable** |
| a. Information or tools you can use in your work |  |  |  |  |
| b. Increased motivation to prevent hate, intolerance, and/or bullying in your community |  |  |  |  |
| c. Deeper understanding of why hate crimes need to be reported, investigated and prosecuted |  |  |  |  |
| d. New ideas for improving relationships with communities |  |  |  |  |
| e. Deeper understanding of how to serve hate crime victims |  |  |  |  |

3) What additional information and/or supplemental resources would you like to see presented in future webinars to support your work?

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4) What is your main takeaway from participating in this webinar?

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5) Additional comments?

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6) Demographic Information

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| We request the following information to help us understand and better serve our audience. Thank you. |
| a. Gender ☐Male ☐Female ☐ Other |
| b. Age ☐12 or younger ☐13-18 ☐19-25 ☐26-35 ☐36-45 ☐46-55  ☐56-65 ☐66+ |
| |  | | --- | | c. Ethnicity ☐Hispanic or Latino  ☐ Not Hispanic or Latino | | d. Race ☐American Indian or Alaska Native ☐Asian ☐Black or African American ☐Native Hawaiian or Other Pacific Islander ☐White | |
| e. Constituency ☐Law enforcement ☐Student ☐Educator ☐Community member  ☐Civic leader ☐Faith group member ☐Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| f. Occupation |

Would you like to get more resources or updates from Not In Our Town?

If yes, please provide: Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for your participation!**

**For more information on how to prevent hate, intolerance, and bullying in your community, please visit the Not In Our Town website at** [**www.niot.org**](http://www.niot.org)**.**

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