

## BRSS TACS TTA Events Survey

### 1. Section A:

**A1. Please print the [title/name] of the BRSS TACS TTA event you participated in:**

**A2. Which of the following best describes this BRSS TACS TTA event?**

- Online training, webinar or other online event
- Site visit or other on-site technical assistance
- Long-term telephone/email consultation
- In-person conference presentation or workshop
- Annual or semi-annual Grantee Meeting presentation or workshop
- Other

Other (please specify):

**A3. Please select the response that best indicates your opinion about the BRSS TACS TTA event.**

	Strong agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Don't know/not applicable
The event was well organized.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I learned something valuable from participating in this event.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I expect to use the information I learned in this event.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The presenters and/or technical staff for this event were knowledgeable about the content area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The information provided was based on current research, best practices, and resources.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Exit this survey

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**2. Section B:**

The next questions ask about your overall opinion about the BRSS TACS TTA event.

**B1. Please select the response that best indicates your opinion about participating in the BRSS TACS TTA event.**

	Very satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very dissatisfied	Don't know/not applicable
How satisfied are you with the quality of the information/instruction/assistance you received during this event?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How satisfied are you with the quality of the products you received as part of this event (e.g., slide presentation, worksheets, resource list, or other tools)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall, how satisfied are you with the BRSS TACS TTA event?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**B2. Optional: Please provide any additional comments or recommendations for future BRSS TACS training or technical assistance events.**

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### 3. Section C:

The next few questions ask about your background and experience with SAMHSA.

**C1. Which of the following categories best describes your role?**

Mark all that apply.

- Provider
- SAMHSA Grantee
- Consumer-Operated Services Providers
- Certified Peer Specialist
- Recovery Coach
- Other Peer Provider
- State or Territory Administrator
- Native American Tribe
- Other

Other (please specify)

**C1a. Optional:** Please indicate which SAMHSA grant program(s) you oversee or are part of:

**Thank you for participating in our survey!**  
**We look forward to serving you at future BRSS TACS TTA events.**

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Done