

## OJJDP NATIONAL TRAINING AND TECHNICAL ASSISTANCE CENTER WEBSITE FEEDBACK FORM

*Thank you for visiting the Office of Juvenile and Justice and Delinquency Prevention (OJJDP) National Training and Technical Assistance Center (NTTAC) website. Your feedback about the website is indispensable in our ongoing efforts to improve the support that OJJDP NTTAC provides to the field. Your participation is completely voluntary.*

**Please indicate the extent to which you agree or disagree with the following statements about the Website.**

WEBSITE FEEDBACK	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
1. The website is user-friendly and I am able to navigate through it with ease.	1	2	3	4	5
2. I plan to continue using this site for my information and training/technical assistance needs.	1	2	3	4	5
3. I will recommend this site to others.	1	2	3	4	5

4. Were you able to find the information you were looking for?

- Yes, I found all of the information I was looking for
- Yes, I found some of the information I was looking for
- No, I did not find the information I was looking for and I need of the following additional information:

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5. Was the TTA Request Form process user-friendly?

- Yes
- No
- N/A

If No, please explain:

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6. How did you discover the OJJDP NTTAC website?

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> OJJDP NTTAC exhibit, publication, or conference presentation</li> <li><input type="checkbox"/> OJJDP TTA Provider</li> <li><input type="checkbox"/> JuvJust listserv</li> <li><input type="checkbox"/> Colleague who is familiar with OJJDP NTTAC resources</li> <li><input type="checkbox"/> Search engine such as Google</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> My OJJDP program manager or other OJJDP staff person</li> <li><input type="checkbox"/> Social media such as Facebook, Twitter or YouTube</li> <li><input type="checkbox"/> Link from another website (please specify):<br/>_____</li> <li><input type="checkbox"/> Other (please specify): _____</li> </ul> |
|---|---|

7. How frequently do you visit the OJJDP NTTAC website?

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> This is my first time</li> <li><input type="checkbox"/> Less than once a year</li> <li><input type="checkbox"/> 1 to 4 times a year</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> 1 to 4 times a month</li> <li><input type="checkbox"/> Once a week or more</li> </ul> |
|--|---|



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8. What is the primary reason you came to the OJJDP NTTAC website today? (please check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> To find general information about the juvenile justice field | <input type="checkbox"/> To gather resources and toolkits     |
| <input type="checkbox"/> To request training and/or technical assistance              | <input type="checkbox"/> To perform tasks as a Consultant     |
| <input type="checkbox"/> To learn about OJJDP training opportunities                  | <input type="checkbox"/> To perform tasks as a Requester      |
| <input type="checkbox"/> To learn about OJJDP tools                                   | <input type="checkbox"/> To perform tasks as a TTA Provider   |
| <input type="checkbox"/> To learn about the OJJDP Online Training Center              | <input type="checkbox"/> To visit the OJJDP Online University |
| <input type="checkbox"/> To learn about other TTA Providers                           | <input type="checkbox"/> Other (please specify): _____        |

9. How can OJJDP NTTAC website be improved?

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10. Additional comments:

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11. Which of the following best describes the field in which you work? (Please choose only one – drop down list)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Child and family services (e.g., child welfare, adoption) | <input type="checkbox"/> Faith-based program/organization                              | <input type="checkbox"/> Research                                      |
| <input type="checkbox"/> Children exposed to violence/trauma                       | <input type="checkbox"/> Formula Grant   | <input type="checkbox"/> SAG Representative                            |
| <input type="checkbox"/> Children's Advocacy Centers                               | <input type="checkbox"/> Internet Crimes Against Children (ICAC)                       | <input type="checkbox"/> Education                                     |
| <input type="checkbox"/> Communication   | <input type="checkbox"/> Juvenile justice specialist                                   | <input type="checkbox"/> State requirements                            |
| <input type="checkbox"/> Community-based program/organization                      | <input type="checkbox"/> Law enforcement   | <input type="checkbox"/> State/local government                        |
| <input type="checkbox"/> Compliance Monitoring                                     | <input type="checkbox"/> Mental health   | <input type="checkbox"/> Substance abuse                               |
| <input type="checkbox"/> Corrections/Detention                                     | <input type="checkbox"/> Missing children  | <input type="checkbox"/> Training and technical assistance             |
| <input type="checkbox"/> Court Appointed Special Advocate (CASA)                   | <input type="checkbox"/> Other advocacy (e.g., GAL, CASA)                              | <input type="checkbox"/> Tribal  |
| <input type="checkbox"/> Court services  | <input type="checkbox"/> Parole/community corrections                                  | <input type="checkbox"/> School truancy/discipline/violence prevention |
| <input type="checkbox"/> DMC Coordinator   | <input type="checkbox"/> Probation   | <input type="checkbox"/> Victims of Crime                              |
|  | <input type="checkbox"/> Problem solving/specialized courts (e.g., family/drug courts) | <input type="checkbox"/> Violence prevention                           |
|  | <input type="checkbox"/> Prosecution   | <input type="checkbox"/> Youth development                             |
|  |  | <input type="checkbox"/> Youth mentoring                               |
|  |  | <input type="checkbox"/> Other: _____                                  |

12. Please indicate which state you are from: \_\_\_\_\_ (drop down list)

**Other Optional Questions:**

13. Have you have used < insert tool/resource (e.g., OJJDP's Online University)>?

- Yes, I have used resources from the <tool/resource> often
- Yes, I have used resources from the <tool/resource> a few times
- No, but I am aware of the <tool/resource>\_and what it offers
- No, I do not know much about the <tool/resource>\_and what it offers

14. How useful are the <insert features (e.g., information and resources, trainings)> on < insert tool/resource (e.g., OJJDP's Online University)>?

- Very useful (Please explain.)\_\_\_\_\_



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- Useful (Please explain.) \_\_\_\_\_
- Somewhat useful (Please explain.) \_\_\_\_\_
- Not at all useful (Please explain.) \_\_\_\_\_

15. Please describe additional <insert features (e.g., information and resources, trainings)> that you would like to see offered on < insert tool/resource (e.g., OJJDP's Online University)>?

16. The following tools are available to <purpose>. For each item, please indicate whether or not you have used it and, if applicable, how you intend to use the tool to improve your work.*		
<i>Please select which tools you have used.</i>	<i>Tell us how you used this tool to &lt;insert purpose of interest&gt;.</i>	<i>Provide any comments or suggestions you have about this tool.</i>
<input type="checkbox"/> tool/resource (e.g. widgets, etc.)		
<input type="checkbox"/> tool/resource		
<input type="checkbox"/> tool/resource		
<input type="checkbox"/> tool/resource		
<input type="checkbox"/> tool/resource		

17. Did you access any of the following <insert features (e.g., information and resources, trainings)> on < insert tool/resource (e.g., OJJDP's Online University)>? If so, please indicate which training/resource and, if applicable, how you intend to share or use the information in your work.		
<i>Please select each training/resource you have accessed. (Check all that apply.)</i>	<i>Tell us how you intend to use the training/resource in your work.</i>	<i>Provide any comments or suggestions you have about the training/resource.</i>
<input type="checkbox"/> name		
<input type="checkbox"/> name		
<input type="checkbox"/> name		

*This survey will be offered online; however, in the case of paper surveys please send completed evaluation forms to:  
Christine Leicht, OJJDP NTTAC Evaluation Manager, [Christine.Lleicht@icfi.com](mailto:Christine.Lleicht@icfi.com)*

