

Paperwork Reduction Act Burden: 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. This collection of information is optional and will assist HUD to improve the quality, relevance, and delivery of technical assistance resources. The total time required to complete this survey is estimated to average 15 minutes including the time to review instructions, gather the data needed, and complete and review the survey. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Housing and Urban Development, Office of Economic Development, 451 7th Street SW, Room 7136, Washington, D.C. 20410.

Privacy Act Statement: The Privacy Act of 1974 (P.L. 93-579) requires that you be given certain information in connection with the request for information solicited on this form.

Accordingly, pursuant to the requirements of the Act, please be advised:

Authorization: This collection of information is authorized under Sec. 501 of Title V of the Housing and Urban Development Act of 1970, Public Law 91-609, which authorizes the Secretary "to undertake such programs of research, studies, testing, and demonstration relating to the mission and programs of the Department as he determines to be necessary and appropriate."

Purpose: This collection of information is necessary in order to systematically gather user feedback and outcomes data to evaluate and improve HUD's deployment and management of its technical assistance resources. This type of information on outcomes has been consistently requested by both OMB and Congressional Appropriations Committee staff.

Uses: This information collection is entirely voluntary. Any information collected may be seen and used by HUD staff that are responsible for analysis of HUD's technical assistance program. Results of individual surveys will not be shared with TA providers, other TA recipients, or HUD program office staff that have assisted in coordination of the technical assistance engagement. Survey results may be shared in aggregated form with TA providers or HUD program office staff that coordinate technical assistance. Survey results may also be shared in aggregated form with other HUD stakeholders and Congress.

Disclosure: *Voluntary.* Any information collected in this information collection may be made accessible to the public and shared widely. **Please do NOT submit any personally identifiable information as part of this information collection form,** defined as any information which can be used to distinguish or trace an individual's identity, such as name, social security number, biometric records, etc. alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.

SURVEY FOR COMMUNITY PARTNERS RECEIVING HUD STAFF-LED TECHNICAL ASSISTANCE

Your organization, [CITY], is currently engaged in a Community Partnership with the [FIELD OFFICE CITY] HUD Field Office.

We would like to ask you a few questions regarding your experience and the technical assistance you have received through the Community Partnership with HUD. Before proceeding, please confirm that you were directly involved in this Community Partnership and feel qualified to provide general feedback on the Community Partnership, including questions about how well it met intended goals and outcomes.

- Yes, I was directly involved in this Community Partnership.
- No, I am not the correct person to complete this survey.

IF RESPONSE = NO, I am not the correct person to complete this survey; Please enter the name and email for an individual who had direct experience with the Community Partnership and who would be qualified to answer questions regarding achievement of intended goals and outcomes.

The correct respondent is:

Name: _____
Email: _____

Please complete this survey by [DATE].

If you have any questions while taking this survey, please contact [LEAD COMMUNITY CAPACITY LIASION EMAIL ADDRESS].

Note: Please do not use the "Back" or "Forward" buttons on the top of your browser while in the survey. By doing so, the survey will not work properly, and your responses will not be saved.

SURVEY QUESTION 1: SATISFACTION WITH COMMUNITY PARTNERSHIP

1A. Overall, how satisfied are you with the Community Partnership with HUD?

- Very Satisfied
- Satisfied

- Dissatisfied
- Very Dissatisfied
- I don't know

1B. How satisfied were you with the following elements of the Community Partnership:

Elements	Very Dissatisfied	Dissatisfied	Satisfied	Very Satisfied	I don't know
Knowledge and skills provided by HUD staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization and management of the work by HUD staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication with HUD staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follow-through by HUD staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordination by HUD staff among parties, including subject matter experts, federal agencies, and other partners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summit(s) and Convening(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Connection to Technical Assistance (TA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Connections to Partnerships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other element, please specify: _____ _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide any additional comments related to your ratings:

ANTICIPATED GOALS AND OUTCOMES FOR THIS COMMUNITY PARTNERSHIP

[This section comes pre-filled for the survey respondent; Questions 2-4 will be asked for each Goal]

At the start of this Community Partnership, your community identified the following priority goals and outcomes:

[List Community Goals and Outcomes in table format. See attachment at end for a sample of how this would look for a respondent.]

SURVEY QUESTION 2: PROGRESS TOWARD ACHIEVING SELECTED GOALS

To what extent was this goal achieved?

- 100%**-Goal fully achieved **80%** **60%** **40%** **20%** **0%**-Goal was not achieved I don't know

SURVEY QUESTION 3: FACTORS RELATED TO SUCCESS

[Note: This is a skip pattern question (dependent on score of 20-100% on Question 2)]

3A. What factors contributed towards achievement of this goal? (select all that apply)

- Direct technical assistance provided by HUD staff
- New partnerships, resources, or summits generated by HUD staff
- Guidance or support from a HUD technical assistance provider
- HUD Publication, Resource, or Training
- Other federal agency support or guidance
- Increase in funding or revenue dedicated to the area
- Increase in number of staff assigned to work in that area
- New organizational structure or new/increased leadership support for the area
- New political leadership
- Improvement in local economy or other external factors
- Other, please specify:

I don't know

3B. How likely do you think it is that your community will sustain improvement in the identified goal over the next year?

- Very Likely
- Likely
- Unlikely
- Very Unlikely
- I don't know/ Not applicable, because there was no improvement in the identified area

SURVEY QUESTION 4: FACTORS RELATED TO BARRIERS TO SUCCESS

[Note: This is a skip pattern question (dependent on score of 0-80% on Question 2)]

In your opinion, which of the following prevented your community from fully achieving this goal? [Select all that apply]

- Need for more assistance from HUD staff (please explain specific concern in the comments section)
- Need for more guidance from HUD staff (please explain specific concern in the comments section)
- Need for higher level of engagement from our organization's staff
- Turnover in our organization's staff or leadership
- Need for more available staff members at our organization
- Need for more support from our organization's leadership/management
- Need for more local political support
- Lack of funding or revenue dedicated to this area
- Decline in economy or other external factors

Other, please specify:

I don't know

Please provide any additional comments related to factors affecting progress toward outcomes:

SURVEY QUESTION 5: RECOMMENDATIONS FOR IMPROVING HUD COMMUNITY PARTNERSHIPS AND TECHNICAL ASSISTANCE

Please provide any recommendations for ways to improve HUD's Community Partnerships and technical assistance:

EXAMPLE SURVEY QUESTION 2 – RESPONDENT VIEW

SURVEY QUESTION 2: PROGRESS TOWARD ACHIEVEMENT OF SELECTED GOALS AND OUTCOMES

Local Goal	Outcome
Enhance the educational attainment of at-risk youth	Increase enrollment in after-school programs from 155 students in May 2015 to 315 students in May 2018.

To what extent was this goal achieved?

- 100%-Goal was fully achieved
- 80%
- 60 %
- 40%
- 20%
- 0%-Goal was not achieved
- I don't know

Local Goal	Outcome
Crime	