Center for States Subscription Form

*THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) Public reporting burden for this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The control number for this project is 0970-0401. The control number expires on 5/31/2021.*

**Stay connected with the Center for States!** Join our email community to stay in touch and in the know about what’s happening at the Center. You’ll receive the latest updates about new resources, services, and events that can help support the work you do with children and families. Your participation is voluntary.

**Let us get to know you!** Share information about yourself and your work to receive the information that’s most relevant to you. Your privacy is important to us and your personal information will be kept private.

1. First Name: [Text]
2. Last Name: [Text]
3. Email**\***: [Text]
4. State or territory: Select *[picklist]*
5. What best describes your employer organization? **\***
6. State Child Welfare Agency
7. Territorial Child Welfare Agency
8. County Child Welfare Agency
9. Tribal Child Welfare Agency
10. Private Child Welfare Agency Under Contract for Services
11. Community-Based Service Provider
12. College/University
13. Legal Systems/Courts
14. Federal Government
15. Technical Assistance Provider
16. Other
17. What best describes your primary area(s) of work responsibility? **\***
18. Child Welfare Leadership
19. Continuous Quality Improvement/Quality Assurance/Data Analysis
20. CFSR/PIP/CFSP/APSR
21. Policy Development
22. Child Welfare Training
23. Child Welfare Information Systems
24. Indian Child Welfare Act Implementation
25. Child Protective Services - Intake
26. Child Protective Services – Investigation/Assessment
27. Primary Prevention
28. In-Home Services
29. Foster Care – Case Management
30. Foster Care – Recruitment/Training/Licensing of Resource Families
31. Foster Care – Independent Living/Youth
32. Adoption/Guardianship
33. Youth Leadership/Participation
34. Family Leadership/Participation
35. Court Improvement
36. Legal Representation (of agency, parents, children)
37. Judicial Decision Making
38. Social Work Education
39. Research and Evaluation
40. Student
41. Other Area of Child Welfare-Related Work
42. None of the Above/Not Applicable
43. What best describes your child welfare agency role?
44. Senior Level Management
45. Program Manager/Coordinator
46. Supervisor
47. Front-line staff/worker
48. Student Intern
49. Family Leader
50. Other
51. Not Applicable
52. We would like your feedback to improve our messaging and service delivery. May we contact you (in 3 to 6 months) to schedule a telephone interview or focus group?
53. Yes
54. No

 By checking this box, you consent to our [data privacy policy](https://www.childwelfare.gov/privacypolicy/).**\***