Evaluation of Family Violence Prevention and Services Act (FVPSA) Regional Meeting

Thank you for your participation. In an effort to assess the satisfaction of our meeting content and format, we would like to request your participation in this survey. The information provided will be used to improve FYSB's regional formula grantee meetings under the Family Violence Prevention and Services Act Program. Please note that your participation is voluntary and the information provided will be kept private.

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) Public reporting burden for this collection of information is estimated to average 15 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 OMB # is 0970-0401 and the expiration date is 05/31/2021.

Overall Questions

1. Thinking back on the planning conference calls, did the process for the development of the agenda provide the outcome you hoped for? What parts of the process worked? What do you think could make this process better?

2. This regional meeting was designed to be a peer-to-peer learning experience for most of the meeting. How did we do in meeting this goal?

3. Did you feel comfortable sharing during the activities? If yes, what elements of the meeting encouraged your participation? If no, what would you envision as the best way to promote sharing among colleagues?

4. FVPSA wants to be responsive to grantee's training and technical assistance needs. What can we do better to meet your needs?

5. Did you enjoy this meeting? Tell us a few things that made the meeting enjoyable.

6. F2 Solutions has been a part of the entire process to oversee the logistics of the meeting. What feedback can you share with them to help make the logistics for future meetings successful?

Meeting Specific Topic (these questions will be used for all individual sessions/topics)

Topic to be Identified	Poor	Fair	Good	Very Good	Excellent
How well did this topic meet your learning needs?	**1**	**2**	**3**	**4**	**5**
The impact this session has on your work was:	**1**	**2**	**3**	**4**	**5**
I have clear steps on how to use the information presented:	**1**	**2**	**3**	**4**	**5**

Additional comments:_____