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Thank you for accessing and using the NCPFCE resources or for attending NCPFCE resource specific webinars. We are always striving to improve our programs and resources. Please take a moment to tell us how we are doing. This survey should only take about 10 minutes. It is voluntary and your information will be kept private. We appreciate your feedback!

1. Please let us know how much you agree with the following statements:

	Strongly Disagree	Moderately Disagree	Disagree a Little	Agree a Little	Moderately Agree	Strongly Agree
The NCPFCE (name of resource) are relevant and useful for my work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I received regular notifications about the NCPFCE (name of resource)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
It is easy to access the NCPFCE (name of resource)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The NCPFCE (name of resource) are respectful, non-judgmental, and supportive of diverse groups of children, families, and staff (i.e., free from stereotypes or	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The NCPFCE (name of resource) are inclusive of diverse cultural experiences and backgrounds.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I actively use the NCPFCE (name of resource) in my work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. What factors, if any, prevent you from using the NCPFCE (name of resource)

3. As a result of the NCPFCE (name of resource), how much change have you experienced in each of the following areas?

	No Change	Little Change	Some Change	Substantial Change	NA
Your knowledge of parent, family, and community engagement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your knowledge of children's social-emotional development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your knowledge of strategies related to parent, family, and community engagement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your program's policies related to parent, family, and community engagement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. How useful have the NCPFCE (name of resource) been in changing your practice in the following areas? Please only use N/A for those areas that do not apply to your work.

	Not at all useful	Only a little useful	Moderately useful	Very useful	Extremely useful	N/A: Does not apply to my work
Fostering children's social and emotional development	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engaging parents, families, and communities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fostering parent-child relationships	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Connecting educators with resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Engaging in continuous quality improvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assessing family needs in your program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Building relationships and working with families	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strengthening families in your community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

About You...

5. Which of the following best represents your organization? (Please check ONE response.)

- I work in/with an HS/EHS program
- I work in/ with a Child Care setting
- I work in the State/Regional T/TASystem
- I work in an OHS State/Regional/Federal Office
- I work in an OCC State/Regional/Federal Office
- I am National T/TA Center Staff
- I am a parent/caregiver/guardian

6. What is your primary professional role? (Please check ONE response.)

- | | |
|--|--|
| <input type="radio"/> Assistant teacher/teacher aid | <input type="radio"/> Home visitor |
| <input type="radio"/> Child Care Resource & Referral Agency (CCR&R) Staff | <input type="radio"/> Lead teacher/caregiver |
| <input type="radio"/> Coach | <input type="radio"/> Owner of family child care |
| <input type="radio"/> Data Specialist | <input type="radio"/> Parent/Family Engagement Content Manager/Coordinator |
| <input type="radio"/> Department of Education Early Learning Lead | <input type="radio"/> Policy council/governing body/ board member |
| <input type="radio"/> Director/Program Manager | <input type="radio"/> Professional Development Coordinator |
| <input type="radio"/> Disabilities Manager/Coordinator/ Specialist | <input type="radio"/> Public/Private Partnership Lead |
| <input type="radio"/> Early Childhood Manager | <input type="radio"/> Quality Rating Improvement System (QRIS) Lead |
| <input type="radio"/> Education content manager/ coordinator | <input type="radio"/> State Child Care Administrator |
| <input type="radio"/> Faculty Member within an Institution of Higher Education | <input type="radio"/> State/Child Care Licensing Staff |
| <input type="radio"/> Family childcare specialist/provider | <input type="radio"/> State Pre-K Staff |
| <input type="radio"/> Family services manager/ coordinator/advocate | <input type="radio"/> State-Level Early Childhood Membership Organization |
| <input type="radio"/> Family Support Worker | <input type="radio"/> Systems Specialist |
| <input type="radio"/> Federal Staff OHS | <input type="radio"/> T/TA provider |
| <input type="radio"/> Federal Staff OCC | <input type="radio"/> Technical Assistance Coordinator |
| <input type="radio"/> Grantee Specialist | <input type="radio"/> Territory Child Care Administrator |
| <input type="radio"/> Grantee Specialist Manager | <input type="radio"/> Transportation Content Manager/ Coordinator |
| <input type="radio"/> Head Start State Collaboration Director | <input type="radio"/> Tribal Council/Leaders |
| <input type="radio"/> Head Start State Collaboration Office | <input type="radio"/> Volunteer |
| <input type="radio"/> Health manager/coordinator/specialist | |
| <input type="radio"/> Other (please specify) <input type="text"/> | |

7. Please select your region:

8. Which age group of children do you serve? (Please check all that apply.)

- Ages 0-3 years
- Ages 3-5 years
- Other, (please specify)