

**TRAINING AND
TECHNICAL ASSISTANCE
COORDINATION
FEEDBACK
Form**



**NATIONAL HUMAN TRAFFICKING
TRAINING AND TECHNICAL
ASSISTANCE CENTER**

**OMB Control Number: 0970-0519
Expiration Date: 10/31/2021**

In order to help the National Human Trafficking Training and Technical Assistance Center (NHTTAC) better serve the field, we are reaching out to obtain your feedback. We will protect the privacy of your information in accordance with the Federal Privacy Act, and we will protect the confidentiality of your responses using procedures we have in place, including reporting all information in aggregate to avoid identifying information. Only members of the NHTTAC Evaluation Team have access to information that could identify respondents. If you have any questions about this survey or the evaluation, please contact NHTTACEval@icf.com.

EVENT: _____
DATE(S): _____

Please indicate the extent to which you agree or disagree with the following statements:

TRAINING AND TECHNICAL ASSISTANCE (T/TA) FEEDBACK	Strongly Disagree	Disagree	Agree	Strongly Agree
1. It was easy to work with NHTTAC.	1	2	3	4
2. The T/TA aligned with OTIP's goals and priorities.	1	2	3	4
3. Overall, this was an effective way to support the content and purpose of the meeting.	1	2	3	4
4. NHTTAC collaborated with the necessary stakeholders to meet the objective(s) of the T/TA.	1	2	3	4
5. The T/TA was grounded in a multidisciplinary approach to addressing human trafficking.	1	2	3	4
6. The T/TA reflected a public health approach to addressing human trafficking.	1	2	3	4
7. The T/TA was trauma informed.	1	2	3	4
8. The T/TA was survivor informed.	1	2	3	4
9. NHTTAC staff effectively responded to any obstacles or challenges surrounding the planning or implementation of the T/TA.	1	2	3	4
10. The T/TA was based on current evidence-based research or promising practices.	1	2	3	4

Please indicate the extent to which the T/TA met each stated objective:

T/TA OBJECTIVES	Strongly Disagree	Disagree	Agree	Strongly Agree
11. <Insert learning objective>	1	2	3	4
12. <Insert learning objective>	1	2	3	4
13. <Insert learning objective>	1	2	3	4
14. <Insert learning objective>	1	2	3	4
15. <Insert learning objective>	1	2	3	4

16. What could NHTTAC have done differently to better support the objectives of the T/TA?

Thank you for taking the time to complete this form and helping to improve NHTTAC activities.

Paperwork Reduction Act Notice

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. The estimated average time to complete this form is 3 minutes. If you have comments regarding the accuracy of this estimate or additional suggestions, please write to the NHTTAC Evaluation Team at NHTTACEval@icf.com or 9300 Lee Highway, Fairfax, VA 22031.