

# Trainer Survey for Your Money, Your Goals

Thank you for completing this survey. This information is being collected to help the Consumer Financial Protection Bureau track use of Your Money, Your Goals materials. Complete this survey, providing short written responses and selecting from response options, as prompted by the survey questions. Please note that your responses will be kept private to the extent permitted by law and when survey results are reported none of your answers will be directly connected to you. Please see the Privacy Notice and Paperwork Reduction Act statement on the last page of this survey.

## 1. What organization do you represent?

Organization

City & state

Zip code

## 2. What organization hosted the train-the-trainer event you attended?

Name of organization

Not sure

The remaining questions ask you about the training you led for staff or volunteers in your community about how to use Your Money, Your Goals with the people they serve.

## 3. Did you train others in-person or remotely?

In-person → Where? City, state, & zip code

Remotely (for example, by webinar or conference call)

## 4. Did you cover these Your Money, Your Goals materials in your training?

	Yes	No
a. Financial empowerment toolkit	<input type="radio"/>	<input type="radio"/>
b. Focus on Military Communities	<input type="radio"/>	<input type="radio"/>
c. Focus on Native Communities	<input type="radio"/>	<input type="radio"/>
d. Focus on People with Disabilities	<input type="radio"/>	<input type="radio"/>
e. Focus on Reentry	<input type="radio"/>	<input type="radio"/>
f. Behind on bills? Start with one step	<input type="radio"/>	<input type="radio"/>
g. Building your savings? Start with small goals	<input type="radio"/>	<input type="radio"/>
h. Debt getting in your way? Get a handle on it	<input type="radio"/>	<input type="radio"/>
i. Want credit to work for you? Start with these steps	<input type="radio"/>	<input type="radio"/>

**5. How many people did you train in this training?**

Total number of participants

**6. When was the training? If you trained the same group of people over multiple days, enter the first day of the training.**

mm/dd/yyyy

**7. What was the total duration of the training? If you trained the same group of people over multiple meetings, add up the total length of time you trained that group.**

Total hours

**8. Did you collect the following items at your training?**

	Yes	No	Unsure
a. Training sign-in sheet(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Pre-training participant survey	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Post-training participant survey	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Privacy Notice**

Information you provide in response to this survey will help the survey sponsor the Consumer Financial Protection Bureau (Bureau) evaluate the effectiveness of Your Money, Your Goals training.

The Bureau will not obtain or access any information that directly identifies respondents, and any answers or comments you provide will not be tied to you individually. The agency will only obtain and access de-identified results and aggregated analyses of those results. Any directly identifying information will only be used by ICF International (survey facilitator) and partner organizations to facilitate distribution and collection of surveys and survey responses. Survey responses will not be shared and will be kept private except as required by law.

This collection of information is authorized by Pub. L. No. 111-203, Title X, Sections 1013 and 1022, codified at 12 U.S.C. §§ 5493 and 5512.

Your participation is voluntary, and you may withdraw participation at any time.

**Paperwork Reduction Act**

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this collection is 3170-0067. It expires on XX/XX/XXXX. The time required to complete this information collection is estimated to average approximately 5 minutes per response. Comments regarding this collection of information, including the estimated response time, suggestions for improving the usefulness of the information, or suggestions for reducing the burden to respond to this collection should be submitted to the Consumer Financial Protection Bureau (Attention: PRA Office), 1700 G Street NW, Washington, DC 20552, or by email to [PRA\\_Comments@cfpb.gov](mailto:PRA_Comments@cfpb.gov).