

**In-Person Convening
Child Care Policy Research Partnership Grantees
Meeting Evaluation Form**

Friday, March 27, 2020 – Liaison Washington Capitol Hill

Thank you for attending the CCPRP Grantee meeting! Please take a few minutes to provide feedback. Your responses will be used to shape future Community of Practice (CoP) meetings.

Please circle a number to indicate whether you agree or disagree with each statement.

1=Strongly Disagree 2=Disagree 3=Neither Agree Nor Disagree 4=Agree 5=Strongly Agree

	Strongly Disagree	-----	Strongly Agree		
<u>Session 1: Sharing Grantee Updates with Shannon</u>					
1. I felt this session was a good use of my time.	1	2	3	4	5
2. I am more aware of how my project goals relate to federal policy interests.	1	2	3	4	5
<u>Session 2: Peer Working Group Session I</u>					
3. Which peer working group did you join for Session I?	-----				
4. I felt this session was a good use of my time.	1	2	3	4	5
5. I felt opportunities for collaboration became clearer.	1	2	3	4	5
<u>Session 3: Making Information Useful to State Administrators</u>					
6. I felt this session was a good use of my time.	1	2	3	4	5
7. I felt the discussions were helpful for my project.	1	2	3	4	5
<u>Session 4: Peer Working Group Session II</u>					
8. Which peer working group did you join for Session II?	-----				
9. I felt this session was a good use of my time.	1	2	3	4	5
10. I felt opportunities for collaboration became clearer.	1	2	3	4	5
<u>Session 5: Sampling and Recruitment</u>					
11. I felt this session was a good use of my time.	1	2	3	4	5
12. I felt the discussions were helpful for my project.	1	2	3	4	5
<u>Session 6: Next Steps</u>					
13. I felt this session was a good use of my time.	1	2	3	4	5
14. I understand how the CoP will support the CCPRP grantees.	1	2	3	4	5
<u>Reflecting on the Meeting as a whole</u>					
15. Overall, I felt the meeting was a good use of my time.	1	2	3	4	5
16. I felt comfortable contributing to the discussion.	1	2	3	4	5
17. I will be able to apply what I learned in the meeting to my work.	1	2	3	4	5

18. If you disagreed (2) or strongly disagreed (1) with any statements above, please explain further:

19. Please circle a response to indicate if you would have preferred to spend more time, about the same time, or less time on each of the following:

- | | | | | |
|------|------------------------------------|-----------|----------------|-----------|
| i. | Grantee Updates | More time | About the same | Less time |
| ii. | Whole group discussion | More time | About the same | Less time |
| iii. | Peer working groups | More time | About the same | Less time |
| iv. | Planning next steps | More time | About the same | Less time |
| v. | Informal networking and discussion | More time | About the same | Less time |

20. What aspects of the meeting did you find most useful?

21. Do you have any additional comments for the meeting organizers, including topics you wish had been covered more deeply? Topics you would like to discuss in our next meetings?

22. Please indicate your role:

- Grantee CCDF lead agency staff
- Grantee research partner

Thank you for your time!

Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to collect participant feedback to shape future meetings. Public reporting burden for this collection of information is estimated to average 5 minutes per response. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to jisaacs@urban.org.