OMB Control Number: 0970-0401 Expiration date: 05/31/2021

HHS ACF ORR UAC Path Train-the-Trainer 2021 [English (United States)]

The UAC Path Training Team is gathering information on confirmed participants for the Train-the-Trainer in January 2021. If you will be participating in the rollout to Path as a Trail Guide, please complete the fields below and submit your responses by this [date TBD].

If you have any questions, please reach out to [Name] at [Email].

1.	What is your first name?
2.	What is your last name?
3.	What is your work email address?
	What is your role?
	te: We will use this information to assign you to the proper profile in lesforce for UAC Path.
	UAC Path System Administrator
	Data Migration
_	HS-PRS Provider: HS-PRS Staff
_	HS-PRS Provider: HS-PRS Subcontractor
	UAC Monitor: ORR Monitoring Staff
_	Program Performance Specialist: ORR Monitoring Staff
_	Project Officer: ORR Monitoring Staff
_	] Intakes Team: ORR Intakes Staff
_	] DHS Staff ] DHUC Medical Team Member
_	National Call Center
_	Case Coordinator
_	FFS Supervisor
	FFS: FFS Staff
_	CFS: FFS Staff
	] PSC Staff

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to allow ORR to gather information from grantee care provider programs for the Train-the-Trainer phase of UAC Path (ORR's new case management system) implementation. Public reporting burden for this collection of information is estimated to average 5 minutes per grantee, 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 subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # for this collection is 0970-0401 and the expiration date is 05/31/2021. If you have any comments on this collection of information, please contact

<ul> <li>Director</li> <li>Lead Case Manager: Program Leadership</li> <li>Lead Clinician: Program Leadership</li> <li>Program Support Staff: Program Leadership</li> <li>Case Manager: Program Staff</li> <li>Clinician: Program Staff</li> <li>Medical Coordinator: Program Staff</li> <li>PSA Compliance Manager: Program Staff</li> <li>Legal Service Provider</li> <li>Other:</li> </ul>						
<b>5.</b> Please use this space to include any comments on the roles you selected above:						
6. What is your work     HQ   AZ   Central TX   Houston / El Paso   Mid-Atlantic   Midwest   Northeast   South Texas/Rio G   South East   Special Pop   West Coast   Other	Region Frande Valle		on your far	niliarity wit	h the	
7. Please rank the following question based on your familiarity with the current UAC Portal.						
	Strongly Disagree	Disagre e	Neutr al	Agre	Strongly Agree	
I am very comfortable with the UAC Portal.						
<ul> <li>8. Are/were you a Path User Acceptance Testing (UAT) participant?</li> <li>Yes, I participated in UAT</li> <li>No, I did NOT participate in UAT</li> <li>Response Text</li> </ul>						
<b>9.</b> Do you have prior S	Salesforce e	experience?				

<ul><li>□ No</li><li>□ Response Text</li></ul>
<ul><li>10. Do you have prior experience with using Trailhead, a training platform by Salesforce?</li><li>Yes</li><li>No</li><li>Response Text</li></ul>
11. Is there any additional information you would like to share?