

# Early Childhood TTA Cross-System Evaluation Project Post-Webinar Feedback Form

**NOTE:** This document includes a universe of questions. We will select 11 questions from this set of questions for each webinar.

**Thank you for attending the OHS National TTA Survey Webinar for Federal and TTA Staff on [DATE]!**

We strive to improve the information and resources we provide. Please take a moment to tell us how we did by answering the questions below. This brief survey is voluntary, and all feedback will be kept private. To further protect your privacy, please refrain from including personally identifiable information in open-ended responses.

**What is your primary ROLE (please choose one from the list on the back of this page)?**

- Federal Staff - Central Office
- Federal Staff - Regional Office
- State Head Start Collaboration Office
- National Centers
- Regional TTA Team / Specialists
- Other: (please specify) \_\_\_\_\_

How many YEARS have you been in your current role?

- Less Than 1 Year
- Over 1 Year: (please \_\_\_\_\_ Years specify)

How much do you agree with these statements?	Strongly Disagree	Disagree	Agree	Strongly Agree
<b>The content of the session was relevant to my work.</b>				
<b>The presenters were effective in communicating key information.</b>				
<b>I learned something during this session that I plan to use in my work.</b>				
<b>I plan to share the information received during the training with others.</b>				
<b>I know how to use this information with diverse populations</b>				

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to gather general feedback on webinars about the Head Start Grantee Training and Technical Assistance Survey. Public reporting burden for this collection of information is estimated to average 5 minutes per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary 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 # is 0970-0401 and the expiration date is 06/30/2024. If you have any comments on this collection of information, please contact Ann Rivera, ann.rivera@acf.hhs.gov.

OHS will share [written products with figures and findings/fact sheets/reports] from the T/TA Survey in the future. <b>I plan to look more closely at these findings when the products are available.</b>				
OHS will share unidentifiable T/TA Survey data with T/TA partners in the future. <b>I plan to dig into these data when they are available.</b>				

**How much did the event increase your knowledge of the topic(s) presented?**

No Increase <input type="radio"/>	Small Increase <input type="radio"/>	Moderate Increase <input type="radio"/>	Large Increase <input type="radio"/>
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Please identify one concept or skill that you learned that you will use in your work.

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How could this session/event be more inclusive of or responsive to diverse audiences?

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**Please let us know whether you found the content presented in this session to be too simple, too advanced, or about right.**

Far too simple <input type="radio"/>	A bit too simple <input type="radio"/>	About right <input type="radio"/>	A bit too advanced <input type="radio"/>	Far too advanced <input type="radio"/>
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**What topics from the TTA Survey would you like to learn more about in the future?**

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