

OMB Control Number: 1225-0088

OMB Expiration Date: 1/31/24

Public reporting burden for this survey is estimated to average 45 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the survey. This collection of information is voluntary. You are not required to respond to this collection of information unless it displays a valid OMB control number. Please send comments regarding the burden estimate or any other aspect of this collection of information to the Office of Disability Employment Policy, Department of Labor, 200 Constitution Ave., NW, S-1313, Washington, DC 20210 or odepemail@dol.gov and reference OMB control number [1225-0088]. **NOTE: Please do not send your completed survey to this address.**



CAPE-Youth Evaluation: Working Group Members

Study Information and Statement of Consent

The Council of State Governments has contracted the American Institutes for Research (AIR) to independently evaluate the Center for Advancing Policy on Employment for Youth (CAPE-Youth).

Purpose. This survey aims to collect feedback from CAPE-Youth Working Group members about the services and resources provided or delivered by CAPE-Youth. The survey should take about 10 minutes to complete.

Risks and Benefits. There are no anticipated risks to completing this survey. The benefits are that Working Group members can share their perspectives and experiences and help CAPE-Youth improve its services and resources designed to support the development of policies that promote the employment of youth and young adults with disabilities.

Voluntary Participation. Your participation in this survey is voluntary. There are no consequences if you decide you do not want to participate. Even after you consent to participate, you can skip any question and quit the survey anytime.

Confidentiality. AIR will keep the information you share in this survey confidential. We will store survey data in a secure location to which only AIR staff will have access. In addition, survey data will be reported in the aggregate, meaning we will not report findings at the individual level. We will keep your identity unknown in our reporting of findings.

Contact information. If you have any questions about the study or this survey, please contact Julia Marchand at jmarchand@air.org. If you have questions about your rights as a survey participant, you can contact AIR's Institutional Review Board by e-mail at IRBChair@air.org or call toll-free at 1-800-634-0797.

1. Please Select One.

- ☐ I have read and understand the above information, and **I agree** to participate in this survey.
- ☐ **I do not agree** to participate in this survey.



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Resources

2. What resources produced by CAPE-Youth have you accessed or used? (select all that apply)

- ☐ Blogs
- ☐ State policy/information
- ☐ scans Policy briefs
- ☐ Implementation toolkits
- ☐ Research Reports
- ☐ Other (please specify)

- ☐ I have not accessed or used resources developed by CAPE-Youth.



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Resources - Utilized

3. Thinking about the resources that you have accessed or used, to what extent were they...

	Not at all	Somewhat	For the most part	Very much so	Not sure
Based on evidence or emerging promising practices.	☐	☐	☐	☐	☐
Relevant to your current needs or priorities related to disability employment.	☐	☐	☐	☐	☐

4. What CAPE-Youth resources or types of resources have been most helpful to you?

5. How could CAPE-Youth improve the resources it develops?



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Resources - Not Utilized

6. If you haven't accessed or used CAPE-Youth resources, please indicate why.
(Select all that apply)

- ☐ The content of the resources was not applicable to my needs or
- ☐ priorities. I didn't know about CAPE-Youth resources.
- ☐ I didn't know how to access CAPE-Youth resources.
- ☐ Other (please specify)



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Events

7. How many CAPE-Youth events—presentations, conferences, or webinars—in which information about disability employment was shared have you attended in the past year?

- ☐ 1-2
- ☐ 3-5
- ☐ More than 5
- ☐ I have not attended CAPE-Youth events in the past year.



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Event - Utilized

8. Thinking about the CAPE-Youth events that you have attended, to what extent was the information shared...

	Not at all	Somewhat	For the most part	Very much so	Not sure
Based on evidence or emerging promising practices.	☐	☐	☐	☐	☐
Relevant to your current needs or priorities related to disability employment.	☐	☐	☐	☐	☐

9. What events or types of events have been most helpful to you?

10. How could CAPE-Youth improve the events that it holds?



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Events - Not Utilized

11. If you haven't you attended CAPE-Youth events in the past year, please indicate why. (Select all that apply)

- ☐ The content of the events was not applicable to my needs or
- ☐ priorities. The events were held at inconvenient times or
- ☐ locations.

Accessing events was difficult.

- ☐ I didn't know about CAPE-Youth events.
- ☐ Other (please specify)



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Technical Assistance

12. Have you received technical assistance from CAPE-Youth—in-person or virtual—to address a specific need or request that you had?

☐☐

Yes

s

No



CAPE-Youth Evaluation: Working Group Members

CAPE-Youth Technical Assistance - Utilized

13. Thinking about the technical assistance that you received from CAPE-Youth, to what extent do you agree or disagree with the following statements?

	Strongly Disagree	Disagree	Agree	Strongly Agree
The technical assistance addressed my needs or request.	☐	☐	☐	☐
The technical assistance helped me to be more effective in my work.	☐	☐	☐	☐

14. What has been most helpful about CAPE-Youth technical assistance?

15. How could CAPE-Youth improve the technical assistance it provides?



CAPE-Youth Evaluation: Working Group Members

About You

16. What state do you represent?

17. What best describes your role?

- ☐ Policymaker/legislator
- ☐ Education program or agency director/administrator
- ☐ Workforce program or agency director/administrator
- ☐ Youth/Young adult Working Group Member
- ☐ Other (please specify)

18. Please share any additional comments that you have about your experience with CAPE- Youth.