OMB Control Number: 2030-0051 Expiration Date: 05/31/2024

EJ TCTAC Intake Form Center A

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Required: The collection of information required for the rendering of appropriate services deployed by Center A.

Your information

- Your first name
- Your last name
- Your title
- Your organization/business name or community affiliation (write N/A
- if not applicable) [Response is Required]
- Website of your organization/business (if applicable)
- Which of the following best describes your business/organization?(Select
- all that apply) [Response is Required]
 - o Community based or grassroots organization
 - o Nonprofit organization
 - o Philanthropic
 - o Tribal Government or Intertribal Consortia
 - Native American Organization (includes nonprofits, cooperatives, corporations, partnerships)
 - Local Governments (as defined by 2 CFR 200.1 includes cities, towns, municipalities,
 - o and counties, public housing authorities and councils of government)
 - o Institutions of higher education (e.g., private and public universities and colleges,
 - o including community colleges)
 - Private business
 - o Special district
 - o Don't know/Not sure
 - o Other (please specify)
- Preferred form of contact
- [Response is Required]

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- o Email
- o Phone call
- o SMS/text messaging

If previous response = Email

- Please provide your E-mail address for future communications
- [Open ended]
- What is your preferred language for future communications?
- [Open ended]

If previous response = phone call or SMS

- Please provide your phone number for future communications
- [Open ended]
- What is your preferred language for future communications?
- [Open ended]

Community information

Please provide the following socio-demographic information for the impacted community or communities for which you are seeking technical assistance.

- Name of the community [Open ended]
- Which state is this community located in? (Select all that apply) [Response is Required]
 - o Alaska
 - o Idaho
 - o Oregon
 - o Washington
 - o Other (please specify)
- Please select the group(s) that represent the impacted community or communities.

(Select all that apply) [Response is Required]

- o Asian
- o Black or African American
- o Elder persons (i.e., 65 years and older)
- Hispanic or Latino/Latina/Latinx
- o Houseless persons
- o Immigrants
- o Lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons
- o Low income persons
- o Middle Eastern or North African
- o Mesoamerican Indigenous
- o Native Hawaiian and Pacific Islanders
- o Native American/Indigenous/American Indian/Alaska Native
- o Persons who live in rural or remote areas
- o Persons with disabilities
- o Refugees
- o Religious minorities

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- Other, please specify
 (The information will be gathered to understand the reach of the program to priority communities.)
- Please use this space if you would like to provide more details about
- the group(s) that represent the impacted community or communities. (e.g., Thai community in Eastern Oregon).[Open
- ended]
- What is the approximate population of the impacted community?
- [Response is Required]
 - o 2,500 or under
 - o 2,500 to 10,000
 - o 10,000 to 50,000
 - o More than 50,000
 - o I am not sure
- What is the preferred communication language of the impacted community?
- [Open ended]

Environmental or Energy Justice Issue

- Please provide a brief description (500 words or less) of the energy or environmental
- justice issue faced by the impacted community or communities. [Open
- ended] [Response is Required]
- How can we help you? In 500 words or less, please describe the assistance you're looking
- for. If you're not sure, that's ok, we will follow up with you to discuss further.
- [Open ended] [Response is Required]
- In 500 words or less, please share what is the desired community outcome for this request?
- If you're not sure, that's ok, we will follow up with you to discuss further.
- [Open ended] [Response is Required]

Final section

How did you hear about the Northwest Environmental Justice Center? [Open ended] [Response is Required]

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