

Grantee Technical Assistance and Training Form

OMB Control Number: XXX (Expires XX/XX/XX)

Recently your organization completed the *Public Health AmeriCorps Grantee Survey*. The following four questions are a companion to the survey.

1. What challenges has your organization faced with operating your Public Health AmeriCorps program? [150 words limit]
2. What successes has your program accomplished to-date that align with the key program goals of PHA? Specifically, please share successes related to impacts of the program on community beneficiaries and on members gaining insight into a public health career. [150 words limit]
3. What type of training could AmeriCorps offer your Public Health AmeriCorps members to enhance their impact at their service site, and in the communities that they serve? [150 words limit]
4. Please share any lessons learned that your team has identified since operating your program. [150 words limit]

Thank you again for taking the time to provide insights on the implementation of your Public Health AmeriCorps grant.

The JBS evaluation team will only use your responses for research purposes. For purposes of tracking response will you confirm your organization's contact information?

5a. Name of your organization _____

5b. Your First Name: _____

5c. Your Last Name: _____

5d. Your work Phone: _____

5e. Your work Email: _____