Questions for Child Care Technical Assistance Network (CCTAN) All Hands Meeting - March 2024

[To be completed on the meeting registration site via online form]

- 1. First Name, Last Name
- 2. Prefix
- 3. Email
- 4. Role (Federal Employee, Invited Presenter or Guest, National Center Staff).
 - If selecting the National Center Staff, there is a drop down list to select the center)
- 5. Title
- 6. Organization
- 7. Address (City, State, Zip)
- 8. Phone
- 9. Do you have any special ADA needs? Fill in the blank
- 10. Emergency Contact Name
- 11. Emergency Contact Phone Number
- 12. How many years have you been with CCTAN?
 - Fewer than 2
 - 2-5
 - 5-8
 - 8+
- 13. What was your role or position prior to joining CCTAN? (Check any/all that apply)
 - Worked in CCDF lead agency
 - Worked in child care licensing
 - TA provider or trainer (state or local level)
 - Early care and education or school aged care provider
 - Other (option to specify)
- 14. If you an experienced CCTAN TA provider, what accomplishments in TA development/delivery are you most proud of and what factors do you think contributed to that success?
- 15. What barriers or challenges are you facing in your TA-related work?
- 16. What are you hoping to take away from this meeting?

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