

## 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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