**Feedback Form**

Thank you for attending the meeting. Please provide us with feedback on your experience by completing this form. Your feedback is valuable and greatly appreciated.

**Please select your role at this event.**

* Tribal CCDF Administrator
* Tribal CCDF Lead Agency Staff
* Tribal Fiscal Staff
* Federal Employee
* OCC National Center TA Staff
* Invited Presenter or Guest
* Other (please specify)

**Rate the overall meeting:**

* Excellent
* Good
* Fair
* Poor

**The information presented was respectful, nonjudgmental, and supportive of diverse populations (i.e., free from stereotypes or bias).**

* Strongly agree
* Agree
* Disagree
* Strongly disagree

**Comments:**

**Event Rating**

**Useful and Relevant** (i.e., provided you with practical information or a practical perspective to inform your current work)

* Extremely
* Very
* Slightly
* Not at all

**Influential** (i.e., influenced your thinking; enabled you to think differently; helped you analyze, synthesize, or integrate information in a new way)

* Extremely
* Very
* Slightly
* Not at all

**Well Organized** (i.e., thoroughly covered talking points, easy to remember, effectively used the scheduled time)

* Extremely
* Very
* Slightly
* Not at all

**Comments:**

* Do you have specific comments about any session held on the 1st day of the meeting?
* Do you have specific comments about any session held on the 2nd day of the meeting?
* What is one big takeaway you gained from the meeting?
* What has inspired or motivated you?
* What topic would you like to learn more about?
* What is one project that your Tribe is doing that you would like to share with others?
* Please suggest topics that you would like to have covered during future events. Suggested topics might be covered prior to the next meeting.
* Please provide any additional comments or ideas.