## National Center on Early Childhood Quality Assurance

## Standard [Post-Event] Survey

DATE

Subject Line: Your Feedback on [Event Name]

Good day,

We want to learn about your experiences with the [Name of Event] that is part of the National Center on Early Childhood Quality Assurance. Your answers are private and will be used to improve our work.

Please use this survey to provide feedback by reflecting on your participation [over the past year]. The brief voluntary survey will only take about 3 minutes. [Link to Survey]

Thank you.

The National Center on Early Childhood Quality Assurance

### [Event] Survey

Please select your role:

* [QIS Administrator/Statewide]
* [QIS Manager/Statewide]
* [QIS Support/Statewide]
* [CCDF Administrator]
* [Community member]
* [Direct child-serving practitioner (e.g., child care, preschool, home visiting, teacher)]
* [Licensing administrator/manager]
* [Licensing monitoring staff]
* [State level professional (not state government)]
* [Training and technical assistance professional- family child care]
* [Training and technical assistance professional- center-based child care]
* [Tribal representative]
* Other

If other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Content Relevance and Usefulness**

| Please indicate the extent to which you agree with the statements below. | Strongly agree | Agree | Disagree | Strongly disagree | Not applicable |
| --- | --- | --- | --- | --- | --- |
| The [Event] purposes and objectives are clear. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| Resources are provided as needed. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| The experience of being in the [Event] is useful (i.e. provides you with practical information or a practical perspective to inform your work). | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| The experience of being in the [Event] is relevant to my current work (i.e. pertinent to your current work). | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| The experience of being in the [Event] is influential (i.e. influenced your thinking; gave you "a-ha" moments; enabled you to think in a different way about your system(s), your partnerships, or other critical aspects of your work; and/or helped you analyze, synthesize, or integrate information in a new way.) | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| The materials for use with child care providers are easy to use and easy to understand.  | Strongly Agree  | Agree  | Disagree  | Strongly Disagree  | N/A  |

If you marked disagree or strongly disagree above, please take a moment to give us a little more information.

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**Facilitators**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Please indicate the extent to which you agree with the statements below. | Strongly agree | Agree | Disagree | Strongly disagree | Not applicable |
| The facilitator is well prepared. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| The facilitator helps the groupvalue the contributions of each member. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| The facilitator helps guide discussions and share activities about our shared interest. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| The presenter(s) had robust knowledge and experience with the content.  | Strongly Agree  | Agree  | Disagree  | Strongly Disagree  | N/A  |
| The presenter(s) was able to respond appropriately to my questions.  | Strongly Agree  | Agree  | Disagree  | Strongly Disagree  | N/A  |
| The script and resources provide me with the information I need to offer the training.  | Strongly Agree  | Agree  | Disagree  | Strongly Disagree  | N/A  |

If you marked disagree or strongly disagree above, please take a moment to give us a little more information.

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**Benefits**

| Please indicate the extent to which you agree with the statements below. | Strongly agree | Agree | Disagree | Strongly disagree | Not applicable |
| --- | --- | --- | --- | --- | --- |
| I am increasing my awareness and knowledge by participating in the [Event]. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| I feel ready to apply new resources or ideas shared to my work. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| Overall, the experience is relevant and fits my needs. | Strongly agree | Agree | Disagree | Strongly disagree | NA |
| I significantly improved my understanding of the content needed to [offer this training or train other trainers].  | Strongly Agree  | Agree  | Disagree  | Strongly Disagree  | N/A  |
| I feel ready to [offer this training or train other trainers].  | Strongly Agree  | Agree  | Disagree  | Strongly Disagree  | N/A  |

If you marked disagree or strongly disagree above, please take a moment to give us a little more information.

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What barriers, if any, has your participation in the [Event] helped you overcome?

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Which aspect(s) of the [Event] was most useful for you and why?
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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How could we improve this [Event] to better meet your needs?

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