**Gov Delivery Subscription Profile Form**

**OMB Control Number:0970-0531 Expiration Date 09/30/2025**

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**Complete Your Subscriber Profile**

Help us ensure you receive the most relevant news and resources.

Tell us more about your interests and information needs!

1. Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. I am looking for resources to help me with my:

|  |
| --- |
| Work/professional development |
| Education |
| Community/volunteer service |
| Family/Personal situation |

1. What is your primary area of focus or interest? (Select all that apply)

|  |
| --- |
| Prevention |
| Safety |
| Youth |
| Well-being |
| Data systems, evaluation, and technology |
| Workforce |
| Casework practice |
| Social determinants of health |
| Kinship |
| Permanency |
| Funding |
| Partnerships and collaboration |
| Laws, regulations, and policies |
| Families, communities, and youth |
| Children’s Bureau requirements |

1. In which State/territory are you located? [dropdown]
2. If you are looking for resources for work, what is your professional background?

|  |
| --- |
| Adoption services |
| Child protective services |
| Community partner (e.g., faith-based organization) |
| Educator or professor (higher education) |
| Educator or teacher (early childhood to 12th grade) |
| Family support or in-home services |
| Foster care services |
| Health or mental health services |
| Juvenile justice |
| Kinship care services |
| Legal or courts |
| Permanency |
| Prevention services |
| Residential provider |
| Substance use services |
| Youth services |

1. If you work for a child welfare agency, please indicate your primary job function:

|  |
| --- |
| Adoption - Case Management, Subsidy, Post-Adoption Services |
| CFSR/PIP/CFSP/APSR |
| Child Protective Services - Intake |
| Child Protective Services - Investigation/Assessment |
| Child Welfare Information Systems |
| Child Welfare Leadership (e.g. Director, Bureau Chief, Regional Director) |
| Continuous Quality Improvement/Quality Assurance/Data Analyst |
| Foster Care - Case Management |
| Foster Care - Independent Living/Youth |
| Foster Care - Recruitment/Training/Licensing of Resource Families |
| In-Home Services (e.g. PSSF, Family Maintenance, and Reunification Services) |
| Other |
| Training |

1. Which type of resources would be most useful for you? (Select all that apply)

|  |
| --- |
| Conference presentations (e.g. PPT) |
| Guidebooks or toolkits |
| Infographics |
| Journal articles |
| Mobile Phone Applications |
| Online e-books |
| Online news articles |
| Pamphlets or short handouts |
| Podcasts |
| Spanish-language resources |
| Technical reports or briefs |
| Videos |
| Virtual trainings |
| Webinars |

1. Are you interested in occasional updates on other new resources?

|  |
| --- |
| Yes |
| No |