

## ANA East and West Post-Award Survey

1. Trainer:
2. Date of Training:
3. Please select your role in the project
  - a. Project Director
  - b. Project Staff
  - c. Financial Staff
  - d. Other (please specify)
4. Please select the type(s) of project you are thinking of applying for:
  - a. Social and Economic Development Strategies
  - b. Native Languages Preservation and Maintenance
  - c. Esther Martinez Immersion
  - d. Environmental Regulatory Enhancement
  - e. Social and Economic Development Strategies-Alaska
5. Have you received Training or Technical Assistance services from the Regional TTA Center in the past three years? Yes/no

Read the questions below and choose your level of agreement. (1 = Strongly Disagree, 5 = Strongly Agree)

6. The instructors were knowledgeable and helpful throughout this course and culturally respectful of the conditions our Pacific Islander, Alaska Native, and American Indian communities face.
7. My understanding of Community-based Project Design has increased due to this ANA Region Post-Award Training.
8. I have a better understanding about requesting and submitting grant amendments as a result of this training.
9. I understand the ANA reporting requirements and the importance of complying with those requirements.
10. I have a basic understanding about applicable regulations and cost principles due to this training.
11. The Post Award Training has given me the ability to fulfill my role within my funded project.
12. The Post Award Training has provided me with an understanding of the ANA support network and how to utilize it should the need arise.
13. The training materials provide me with good reference materials to utilize during implementation of my project.
14. How can we improve the training to better meet your needs?
15. Any further comments on the training?

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to gather information on the participants' experience with the training and how ANA Training and Technical Assistance Providers can improve training opportunities. Public reporting burden for this collection of information is estimated to average 5 minutes per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0401 and the expiration date is 5/31/2027. If you have any comments on this collection of information, please contact Amy Zukowski@acf.hhs.gov.