

ANA Technical Assistance Feedback

1. Contact Information
2. Have you received Training or Technical Assistance services from any ANA TTA Center in the past three years? Yes/no
3. Technical Assistance Provider who you worked with:
4. Type of TA:
 - a. Applicant
 - i. Pre-submission
 - ii. Unfunded
 - b. Recipient (grantee)
 - c. Other

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

5. The TA Provider was knowledgeable and culturally respectful of the conditions our Pacific Islander, Alaska Native, and American Indian communities face.
6. The TA Provider's feedback was clear, practical and useful,
7. Overall Rating of the Technical Assistance you received
8. Do you need additional information? Yes/no and please explain
9. Any additional comments to share?

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.