

TRAINING AND TECHNICAL ASSISTANCE NEEDS



OMB#: 1121-XXXX

Date of Expiration: XXXX

In order to help the Office for Victims of Crime Training and Technical Assistance Center (OVC TTAC) better serve the field, we are reaching out to obtain your feedback. We will protect the privacy of your information in accordance with the Federal Privacy Act, and we will protect the confidentiality of your responses using procedures we have in place, including reporting all information in aggregate to avoid identifying information. Only members of the OVC TTAC Evaluation team have access to information that could identify respondents. Your participation in this survey is completely voluntary. If you have any questions about this survey or the evaluation, please contact TTACEval@icf.com.

Please provide your e-mail address to enable us to track your engagement with OVC TTAC across offerings and your preferences/insights provided. You will be prompted to provide this same e-mail address each time.

If you do not have an email address or prefer to use a unique identifier, create a username to be used and retained for future OVC TTAC evaluations. Username example: Provide your two-digit birth month, first initial, and middle initial (e.g., 08JD)

Please select the **top three areas** in which your organization/program needs additional training or technical assistance.

- | | | |
|---|---|--|
| ☐ Board Governance | ☐ Identity Theft | ☐ Training or Materials for Instructors or Trainers |
| ☐ Building Resiliency | ☐ Leadership | ☐ Victim Assistance Training |
| ☐ Building Trauma-Informed Organizations | ☐ Military-Civilian Partnerships | ☐ Victim Services, generally |
| ☐ Children Living With Grief and Trauma | ☐ Needs Assessment | ☐ Vision and Mission Development |
| ☐ Compassion Fatigue/Vicarious Trauma | ☐ Outreach/Marketing | ☐ Volunteer Management |
| ☐ Conference Support | ☐ Presentation/Facilitation | ☐ [another topic] |
| ☐ Curriculum Design | ☐ Program Implementation | ☐ [another topic] |
| ☐ Developing/Sustaining Collaboration | ☐ Program Monitoring/Evaluation | ☐ [another topic] |
| ☐ Funding | ☐ Provider Effectiveness | ☐ [another topic] |
| ☐ Elder Abuse | ☐ Strategic Planning | ☐ [another topic] |
| ☐ Enforcing Victims' Rights | ☐ Sustainability | ☐ [another topic] |
| ☐ Financial Management | ☐ Survivors of Homicide | ☐ [another topic] |
| ☐ Grant Writing/Funding | ☐ Technology/Case Management | ☐ [another topic] |
| ☐ Other (please specify): _____ | | |

Thinking about [ask separately for each preferred area of training or technical assistance identified above]:

What is your preferred mode of training or technical assistance?

- ☐ Asynchronous online trainings
- ☐ In-person training/technical assistance
- ☐ Virtual training/technical assistance
- ☐ Webinars
- ☐ Resources (e.g., websites, articles, etc.)
- ☐ Other (please specify): _____

What level of training or technical assistance would you prefer?

- ☐ Introductory
- ☐ Intermediate
- ☐ Advanced
- ☐ Other (please specify): _____

Thank you for taking the time to complete this form and helping to improve OVC TTAC activities.

Paperwork Reduction Act Notice

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. The estimated average time to complete this form is 5 minutes. If you have comments regarding the accuracy of this estimate or additional suggestions, please write to the OVC TTAC evaluation team at TTACEval@icf.com or 1902 Reston Metro Plaza Reston, VA 20190.