

We would appreciate your candor in providing feedback on the technical assistance that you have received from the LACOE After School Technical Assistance Unit in the current 2015-16 year. Please complete all of the questions on this survey to the best of your ability.

1. Please indicate the type of employer that you currently work for.

- School District
- Charter School
- City
- Community-based/non-profit organization as a GRANTEE
- Community-based/non-profit organization as a SUB CONTRACTOR

2. Please identify your position title from the list below.

- Grant Manager: is a district, county, city, or community-based organization (CBO) staff member (CEO or Executive Director) who is ultimately responsible for grant oversight, operations, and overall program direction including ensuring grant compliance, meeting certified assurances, developing or managing budgets, and submitting required reports.
- Program Director: is a person who oversees two or more site-based programs and may evaluate staff. Other titles associated with label can include Regional Manager, Regional Supervisor, Traveling Supervisor, and Quality Assurance Coach.
- Superintendent/Authorized Agent: has the overall authority of the after school/expanded learning contracts with the After School Division of the California Department of Education and can sign on behalf of the district and/or city and/or community based organization
- Fiscal: is the contact for any fiscal related items to the after school/expanded learning grants

3. Please identify which grade levels your program serves. Select as many as apply.

- Elementary School (TK-5 and/or TK-6)
- K-8
- Middle School (grades 6-8 or grades 5-8)
- High School (grades 9-12)

4. Please identify the types of technical assistance that you have received this year 2015-16 from the ASTAU and then rate their usefulness for informing your work. Select all that apply.

	Very Useful	Useful	Not Useful	N/A
Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mentoring (Site Coordinator Leadership/ Development Program, Peer Reviewer Program)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Very Useful	Useful	Not Useful	N/A
Coaching (individualized support focused on specific skills to improve performance)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Consultation both in person and by phone (specialized support focused on programmatic practices and identified needs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in ASTAU special interest groups (English Learners, Data/Evaluation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Receipt of information and/or resources via email and/or hard copy including grantee e-newsletters and special blasts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in Local Learning Communities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in Coaching Technical Assistance Site Visits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in Advisory Committee Meetings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Roll out of the Quality Standards Trainer of Trainer (TOT) Series	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Roll out of Summer Trainer of Trainer (TOT) series	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in Grant Manager Support Calls/Webinars on the roll out of Quality Standards and CQI	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in Program Director Support Calls/Webinars on the roll out of Quality Standards and CQI	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Please describe any current needs that you would have liked for the ASTAU to address in 2015-16.

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6. Please rate the extent to which the technical assistance you have received from the ASTAU has had a positive impact on your program practices (e.g., your personal work, the overall work of your program)?

It has had a substantial impact It has had a more than moderate impact It has had a moderate impact It has had a little impact It has had NO impact

The TA that I have received in 15-16 has positively impacted my program practice

7. Please describe how the TA you have received has impacted your work. Provide at least ONE example below.

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8. Given your interactions with the ASTAU team this year, please describe the extent to which they have been responsive in addressing your concerns.

I received a response in 1 business day

I received a response in 2 business days

I received a response in 3-4 business days

I received a response in 5 or more business days

9. Please share any additional information related to your customer service experiences in 15-16.

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10. Please share any technical assistance needs that you think you might have for 2016-17 so that we can give them consideration as we finalize our work plan

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