Power to the Profession Feedback Form

Please share reflections based on the discussion held today. This form will be shared with the P2P Task Force to inform and influence the development of the current Decision Cycles and the overall P2P framework.

Name:	
Place of Employment/Affiliated Orga	nization:
Email address:	
Phone number:	-
Date of event:	Location of event (city, state):
It is important to understand who answering the following questions	we are reaching and whose voices are missing. Please help us by s:
 Educator and/or educator as 	sistant in center based or school based programs: sistant in home-based programs: or coach and/or TA provider:
What is your race and ethnicity? (Ple White: African American/Black: Latino/a: Asian/Asian American: Native American:	
Do you represent a rural area?	Yes No
If yes, please share the city ar	nd state:
Do you speak a language other than I	English? Yes No
If yes, which language(s)?	
How many years have you been in th	e early childhood education field?
Are you a NAEYC member? Yes If no, are you interested in me	No ore information about NAEYC membership? Yes No
	ovide further feedback about this meeting or to further discuss the No

Today we discussed various topics related to the early childhood profession and the impact the Power to the Profession initiative will have on your career. Please take a second to share your reflections on the conversation we just had.
What excites/energizes you from our discussion around Power to the Profession?
What concerns/worries you from our discussion around Power to the Profession?
What specific recommendations or suggestions would you like to share with the P2P Task Force?
Please share any feedback on the facilitation of today's presentation:
Thank you for adding your voice to the Power to the Profession initiative. Your feedback continues to hold us accountable to our vision of being an initiative for the profession, led by the profession.