**ATTACHMENT H – REGIONAL SUPPLEMENTAL QUESTIONNAIRE**

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| Please complete a Regional Supplemental Questionnaire for each applicable center location for which you are applying. *You may apply for up to four sites, however it is highly unlikely that any one candidate will be awarded oversight of all potential sites.* | | | | |
| **Delta**  **🞎** | | **East County**  **🞎** | **Monument**  **🞎** | **West County**  **🞎** |
| Organization/ Legal Name: |  | | | |
| Contact Person: |  | | | |

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| 1. What makes your agency uniquely qualified to meet the needs of the community and families in this region? |
| 2. What challenges do parenting families have in this region? How have you or would you successfully overcome these challenges? |
| 3. What partnerships do you have, or could you establish, in this region and for what purpose? |
| 4. How do or would you approach civic engagement with parents in this region? |