

Film Evaluation of *Lessons from a Hate Crime Detective*

Instructions: Please answer the following questions based on your recent viewing of *Lessons from a Hate Crime Detective*. Surveys should be returned to The Working Group / Not In Our Town, PO Box 70232, Oakland, CA 94612. Thank you for your participation.

1. Screening location: _____

2. How would you rate the following in reference to this film?

Item	Excellent	Good	Okay	Fair	Poor
a. Handling of topic presented	<input type="radio"/>				
b. Overall impact of film	<input type="radio"/>				
c. Effectiveness of group discussion (if applicable)	<input type="radio"/>				

3. Has this screening provided you with the following?

Item	Yes, very much	Yes, somewhat	No, didn't make a difference	Not applicable
a. Information or tools you can use in your work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Increased motivation to prevent hate, intolerance, and bullying in your community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Deeper understanding of why hate crimes need to be reported, investigated, and prosecuted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Ideas for investigating and tracking hate group activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Practical ideas for improving relations with diverse populations in your community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Deeper understanding of how to serve hate crime victims	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. What opportunities or challenges do you anticipate in showing this film to your community or law enforcement agency?

5. What additional information or supplemental resources would you like to see presented in films and discussions to support your training and outreach efforts?

6. Additional comments?

7. Demographic information: We request the following information to help us understand and better serve our audience.

a. Gender

- Male
- Female
- Other

b. Age

- 12 or younger
- 13–18
- 19–25
- 26–35
- 36–45
- 46–55
- 56–65
- 66+

c. Ethnicity

- Hispanic or Latino
- Not Hispanic or Latino

d. Race

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Pacific Islander
- White
- Other: _____

d. Constituency

- Civic leader
- Community member
- Educator
- Faith group member
- Law enforcement
- Student
- Other _____

e. Occupation:

Would you like to get more resources or updates from Not In Our Town? If yes, please provide:

Name: _____

Phone: _____ E-mail: _____

Thank you for your participation.

For more information on how to prevent hate, intolerance, and bullying in your community, please visit the Not In Our Town website at www.niot.org.

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The public reporting burden for this collection of information is estimated to be up to 5 minutes per response. Send comments regarding this burden estimate or any other aspects of the collection of this information, including suggestions for reducing this burden, to the Office of Community Oriented Policing Services, U.S. Department of Justice, 145 N Street NE, Washington, DC 20530; and to the Public Use Reports Project, Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

You are not required to respond to this collection of information unless it displays a valid OMB control number. The OMB control number for this application is 1103-0115, and the expiration date is June 30, 2017.