Systems Training and Communications Branch Course Evaluation **Technical Training for Professional Development** Course Title and Number: FILE-AID FOR Date: Primary Instructor: **RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) \rightarrow Highest \rightarrow Lowest Highest $\overline{2}$ 1. 1 2 3 4 $5 \mathbb{V}$ 7. 1 3 4 5 2. 1 $2 \square$ 3 4 5√ 8. $1 \square$ 2 3 5 4 3. $\overline{1}$ 3 5 V 9 $2 \square$ 4 1 2 3 4 5 5 V 4. 1 2 3 4 10. $1 \square$ 2 3 4 5 1 2 🗍 5. 2 3 4 5 11. 1 3 4 5 6. 1 $2 \square$ $3 \square$ 4 5 12. 1 2 3 🔲 4 5 B. Course Content and Design Highest Lowest 1. Learning objectives were organized and clear. $4 \square$ $1 \square$ 2 3 🔲 **5**[\] 2 Effectiveness of methodology (lecture, readings, demo $1 \square$ 2 3 □ 4 1 3. Sufficient exercises were used to reinforce and measure learning 2 3 4 C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 1 2 3 🔲 4 2. Responsiveness to questions or need for help. 2 3 4 **[** 5 V 1 3. Organization and presentation. 1 2 3 4 5 V 4. Presented adequate exercises/examples. 3 1 4 D. Course Administration Highest Lowest 1. Course announcements, employee notifications were clear and prompt. 4 ☑ 2 📋 3 2. Facilities were conductive to learning. 1 2 3 🗌 4 5 V 3. Appropriate computer resources were available. (check N/A if applicable) 1 2 3 🔲 4 5 V E. Applications Lowest Highest 1. Overall application of course to current duties. 4 🔽 $1 \square$ 2 3 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Was the course length appropriate for the material covered? Too Short Too long ✓ Adequate □ N/A If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D] pcs OSES OEEAS OASSIS OESAE OTSO ODS ORSIS OTHER NAME (optional): Grade Job Title

Series

Systems Training and Communications Branch Course Evaluation **Technical Training for Professional Development** Course Title and Number: FILE-AID FOR Date: **Primary Instructor:** RDX (DB2 CURRICULUM) -- #031470 **AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) Highest Lowest **→** Highest 1. $1 \square$ 2 3 4 $\overline{1}$ 2 3 4 5 2. $1 \square$ 2 3 4 8. $1 \square$ $2 \square$ 3 4 5 3. $1 \square$ $\overline{2}$ $3 \square$ 4 50 9 $1 \square$ $2 \square$ 5 3 2 10. 4. 1 3 $1 \square$ 3 4 5 5. $1 \square$ 3 4 11. $1 \square$ $2 \square$ 3 4 5 6. $1 \square$ $2 \square$ 3 4 🗌 12. 1 3 4 5□ B. Course Content and Design Lowest Highest 1. Learning objectives were organized and clear. 2 4 $1 \square$ 3 🗌 2 Effectiveness of methodology (lecture, readings, demo 2 $1 \square$ 3 [4 3. Sufficient exercises were used to reinforce and measure learning 3 [C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 1 $2 \square$ 3 🔲 4 🔲 5 2. Responsiveness to questions or need for help. 2 □ 3 4 1 3. Organization and presentation. 2 3 4 5 V 1 | | 4. Presented adequate exercises/examples. D. Course Administration Highest Lowest 1. Course announcements, employee notifications were clear and prompt. 2 3 🗌 4 2. Facilities were conductive to learning. 2 Appropriate computer resources were available. (check N/A if applicable) $\overline{1}$ 3 E. Applications Lowest Highest 1. Overall application of course to current duties. 4 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) rained how to radd relationships to RDX F. Length of Course Too Short Was the course length appropriate for the material covered? Adequate Too long G. Did you complete necessary prerequisites listed on profile? Yes \(\subseteq No. \) If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D Greatinstructor Great Teaching Sty DCS OSES OEEAS OASSIS OESAE OTSO OTHER ODS ORSIS NAME (optional): Job Title Series

Systems Training and Communications Branch Course Evaluation **Technical Training for Professional Development** Course Title and Number: FILE-AID FOR Date: **Primary Instructor: RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) Highest Lowest \rightarrow \rightarrow Lowest Highest 1 2 3 🔲 4 X 1 2 3 🗍 1. 5 7. 4 5□ 2. 3 4 5 1 2 8. 1 2 3 4 5 3. 1 3 4 📉 5 9 1 🗌 2 3 4 5 $2 \square$ 4. 1 2 3 4 🔀 5 10. 1 2 3 4 5 1 2 5. 3 5 4 🔲 11. $1 \square$ 2 3 4 5 6. $1 \square$ $2 \square$ 3 🔲 4 🔲 5 12. 1 🗌 2 3 🗌 4 🔲 5□ B. Course Content and Design Highest Lowest 4 X 1. Learning objectives were organized and clear. $1 \square$ 2 3 🔲 **4** X 2 Effectiveness of methodology (lecture, readings, demo 1 3 2 3. Sufficient exercises were used to reinforce and measure learning 4 🕅 1 2 3 C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 1 $2 \square$ 3 🔲 5 4 2. Responsiveness to questions or need for help. $\overline{2}$ 1 3 5 3. Organization and presentation. 2 3 🖂 1 4 1 5 4. Presented adequate exercises/examples. 1 3 □ 5 D. Course Administration Highest Lowest 1. Course announcements, employee notifications were clear and prompt. 2 3 🗌 4 🔂 5 2. Facilities were conductive to learning. 1 2 3 4 🔣 5 3. Appropriate computer resources were available. (check N/A if applicable) 1 $\overline{2}$ 4 🔊 E. Applications Lowest 1. Overall application of course to current duties. $\overline{2}$ 3 4 X 1 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Was the course length appropriate for the material covered? Too Short X Adequate Too long G. Did you complete necessary prerequisites listed on profile? ☐ Yes ☐ No □ N/A If yes, were they appropriate? List any additional prerequisite(s) you think are necessary H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D XOEEAS DCS **OSES** OASSIS OTSO]OESAE ODS OTHER ORSIS NAME (optional): Grade Job Title ____ Series

Systems Training and Communications Branch **Course Evaluation** Technical Training for Professional Development Date: Course Title and Number: FILE-AID FOR **Primary Instructor: RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) Lowest \rightarrow Highest \rightarrow Lowest Highest $1 \square$ $2 \square$ $\overline{3}$ 4 7. $1 \square$ 2 3 🔲 4 1. 5□ 2. $1 \square$ 2 3 4 1 5 8. 2 3 🗌 4 3 4 X 9 5 3. $1 \square$ $\overline{2}$ $1 \square$ $2 \square$ 3 🗍 4 4. 2 3 $4 \times$ 5 10. $1 \square$ $2 \square$ 5 1 3 🗍 4 3 5 5. $1 \square$ 2 4 11. 1 2 3 4 5 4 $1 \square$ $2 \square$ $3 \square$ 5□ 12. 5□ 6. 1 3 🗌 4 B. Course Content and Design Lowest Highest 1. Learning objectives were organized and clear. 4 🛛 $1 \square$ 2 3 🗍 5L 2 Effectiveness of methodology (lecture, readings, demo 2 3 □ 4 🔯 1 4 🗵 3. Sufficient exercises were used to reinforce and measure learning 2 1 3 5 C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 1 $2 \square$ 3 4 🗌 2. Responsiveness to questions or need for help. 2 3 1 4 3. Organization and presentation. 2 3 ┌ 4 🗀 1 4. Presented adequate exercises/examples. 1 3 4 X D. Course Administration Lowest Highest 1. Course announcements, employee notifications were clear and prompt. 3 2 🔲 5 2. Facilities were conductive to learning. 2 3 3. Appropriate computer resources were available. (check N/A if applicable) 1 2 3 5 E. Applications Lowest Highest 1. Overall application of course to current duties. 3 1 2 $4 \times$ 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Was the course length appropriate for the material covered? Too Short Adequate Too long G. Did you complete necessary prerequisites listed on profile? X Yes □ No If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D DCS OSES **X**OEEAS OASSIS OESAE OTSO ODS ORSIS OTHER NAME (optional): Job Title Series

Systems Training and Communications Branch Course Evaluation **Technical Training for Professional Development** Course Title and Number: FILE-AID FOR Primary Instructor: Date: **RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009 DAVE SILVERBERG** A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) \rightarrow Lowest Highest Lowest \rightarrow Highest 3 5 1. $1 \square$ 2 4 7. 1 🔲 2 3 4 5 2. $\overline{1}$ 2 3 4 5团 8. 1 🔲 2 3 🔲 4 5□ $\overline{1}$ 3 5 4 9 3 3. $2 \square$ 4 $1 \square$ 2 4 5 5 4. $\overline{1}$ 2 3 4 10. $1 \square$ 3 🔲 4 5 2 5. 2 3 4 $\bar{3} \square$ $1 \square$ 5 11. $1 \square$ 2 🖂 4 5□ 3 4 12. 3 🔲 1 2 5 $2 \square$ 5□ 6. 4 🔲 B. Course Content and Design Lowest Highest 1. Learning objectives were organized and clear. 1 2 3 🔲 4 2 Effectiveness of methodology (lecture, readings, demo 1 3 🔲 2 4 3. Sufficient exercises were used to reinforce and measure learning 2 3 4 C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 2 🔲 3 🔲 4 1 5 2. Responsiveness to questions or need for help. 1 2 3 4 5[3. Organization and presentation. 1 2 3 4 4. Presented adequate exercises/examples. 1 3 D. Course Administration Lowest Highest 1. Course announcements, employee notifications were clear and prompt. $1 \square$ 2 3 2. Facilities were conductive to learning. 1 2 3 □ 4 3. Appropriate computer resources were available. (check N/A if applicable) 1 2 3 E. Applications Lowest Highest 1. Overall application of course to current duties. 2 3 🚺 $1 \mid \neg$ 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Too Short ✓ Adequate Was the course length appropriate for the material covered? Too long G. Did you complete necessary prerequisites listed on profile? V Yes los' If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D DCS **T**OEEA: OSES OASSIS OESAE OTSO \square \overline{ODS} OTHER ORSIS

Job Title _____

NAME (optional):

Series

Systems Training and Communications Branch Course Evaluation Technical Training for Professional Development Course Title and Number: FILE-AID FOR Date: Primary Instructor: **RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009 DAVE SILVERBERG** A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) \rightarrow Highest Lowest \rightarrow Highest 2 3 4 55 1 2 1. 1 🔲 7. 3 4 5 54 3 2. $1 \square$ $2 \square$ 3 4 8. 1 2 4 5 3. 1 $2 \square$ 3 4 5 -9 1 🗆 2 3 5 2 5 2 3 4 5 3 4. 1 10. 1 4 5. 3 🔲 4 5 $2 \square$ 5 $1 \square$ 11. 1 $3 \square$ 4 4 5 12. $2 \square$ 5 6. $1 \square$ 2 3 1 🔲 3 4 B. Course Content and Design Lowest Highest 1. Learning objectives were organized and clear. $2 \square$ 3 🗌 1 4 2 Effectiveness of methodology (lecture, readings, demo 2 3 1 4 2 3. Sufficient exercises were used to reinforce and measure learning 1 3 4 C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 1 3 🔲 4 🔲 2 2. Responsiveness to questions or need for help. 3 2 🗍 4 5 -1 3. Organization and presentation. 1 2 3 🗌 4 4. Presented adequate exercises/examples. 3 4 D. Course Administration Highest Lowest 1. Course announcements, employee notifications were clear and prompt. 2 3 🗌 4 2. Facilities were conductive to learning. 1 2 3 Appropriate computer resources were available. (check N/A if applicable) 1 2 3 Lowest E. Applications Highest 1. Overall application of course to current duties. 1 2 4 [] 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Adequate Too long Was the course length appropriate for the material covered? Too Short G. Did you complete necessary prerequisites listed on profile? Yes □ N/A If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D] DCŞ OEEAS **OSES** 4 OASSIS OTSO OESAE **OTHER** ODS ORSIS NAME (optional): Job Title IT SpecialisT Grade Series

Systems Training and Communications Branch **Course Evaluation Technical Training for Professional Development** Course Title and Number: FILE-AID FOR Date: Primary Instructor: **RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) Lowest \rightarrow Highest **→** Lowest Highest 1 2 3 🔲 4 1 1. 5 X 7. 2 3 🔲 4 5 5区 2. 1 2 3 4 8. 1 2 3 🔲 4 5 3. 1 $2 \square$ 3 4 5 🛛 9 1 2 3 5 4 4. 1 2 3 4 5 X 10. 1 2 3 🗌 4 5 5. 1 2 3 4 11. 1 2 3 4 🗍 5 6. 1 2 3 4 5 12. 1 2 3 4 5 B. Course Content and Design Lowest Highest 1. Learning objectives were organized and clear. 1 2 [$4 \square$ 3 2 Effectiveness of methodology (lecture, readings, demo 1 2 3 4 [3. Sufficient exercises were used to reinforce and measure learning 1 4 2 3 C. Quality of Instruction Lowest Highest 1. Instructor's knowledge of subject $1 \square$ 2 3 🗌 4 5X2. Responsiveness to questions or need for help. 2 3 🗌 4 5⊠ 1 3. Organization and presentation. 3 🔲 1 2 4 **5** 🛛 4. Presented adequate exercises/examples. 1 3 🗌 5X 4 D. Course Administration Lowest Highest 1. Course announcements, employee notifications were clear and prompt. 2 3 🗌 4 🔯 5 2. Facilities were conductive to learning. 2 1 3 🔲 4 3. Appropriate computer resources were available. (check N/A if applicable) 1 3 🔲 4 E. Applications Lowest Highest 1. Overall application of course to current duties. 2 4 3 🔲 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Was the course length appropriate for the material covered? Too Short Adequate Too long G. Did you complete necessary prerequisites listed on profile? X Yes No If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D DCS OEEAS OSES OASSIS OESAE OTSO ODS ORSIS OTHER NAME (optional): Series Job Title

Systems Training and Communications Branch **Course Evaluation Technical Training for Professional Development** Course Title and Number: FILE-AID FOR Date: **Primary Instructor: RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) Lowest **→** Highest **→** Highest $1 \square$ $2 \square$ 3 4 7 5 7. 1 2 1. 3 🔲 4 5 $2 \square$ 3 🔲 5 1 4 5 2. 1 4 8. $1 \square$ 2 3 5/ 5 3. 1 2 3 4 9 $1 \square$ 2 3 □ 4 3 4 📝 5 10. 5 4. 1 2 1 2 3 🗍 4 5. 1 2 3 4 5 11. 1 3 5 $1 \square$ 2 3 4 5 12. 3 🔲 6. 1 4 🗍 B. Course Content and Design Lowest Highest 1. Learning objectives were organized and clear. 1 2 3 🔲 4 🗍 2 Effectiveness of methodology (lecture, readings, demo $1 \square$ 2 [3 4 3 3. Sufficient exercises were used to reinforce and measure learning 1 2 4 C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 1 2 3 4 🔲 2 3 2. Responsiveness to questions or need for help. 4 1 3. Organization and presentation. 2 3 🔲 1 4 □ 4. Presented adequate exercises/examples. 1 3 D. Course Administration Lowest Highest 1. Course announcements, employee notifications were clear and prompt. 3 🔲 2 4 [2. Facilities were conductive to learning. 3 🗌 3. Appropriate computer resources were available. (check N/A if applicable) 1 2 3 E. Applications Lowest Highest 1. Overall application of course to current duties. 1 2 3 🔲 4 🔽 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Was the course length appropriate for the material covered? Too long Too Short Adequate G. Did you complete necessary prerequisites listed on profile? Yes □ No □ N/A If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D OEEAS DCS OSES OASSIS OESAE OTSO ORSIS OTHER \square ods NAME (optional): Job Title ____ Series

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Systems Training and Communications Branch **Course Evaluation Technical Training for Professional Development** Course Title and Number: FILE-AID FOR Date: **Primary Instructor: RDX (DB2 CURRICULUM) -- #031470 AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) Lowest Highest \rightarrow \rightarrow Highest 5 1 2 4 7. 1 2 1. 3 3 4 5 4**X** 5 2. $1 \square$ 2 3 5 8. $1 \square$ 2 3 🗌 4 4 2 3. 1 2 🔲 3 5 9 1 3 4 5 2 5 5 $1 \square$ 3 10. 1 2 3 4. 4 5. 1 $\overline{2}$ 3 5 2 🗍 3 4 5□ 11. $2 \square$ 12. $2 \square$ 3 5 6. 1 $3 \square$ 5 4 B. Course Content and Design Lowest Highest 1. Learning objectives were organized and clear. $2 \square$ 3 $4\mathbf{V}$ 1 5 2 Effectiveness of methodology (lecture, readings, demo 2 $1 \square$ 3 3. Sufficient exercises were used to reinforce and measure learning 1 2 3 [C. Quality of Instruction Highest Lowest 1. Instructor's knowledge of subject 1 2 4 3 🔲 3 4**X** 2. Responsiveness to questions or need for help. 2 1 3. Organization and presentation. 1 2 3 4. Presented adequate exercises/examples. 3 1 D. Course Administration Lowest Highest 1. Course announcements, employee notifications were clear and prompt. 3 🗌 2 4 2. Facilities were conductive to learning. 3 🔀 5 3. Appropriate computer resources were available. (check N/A if applicable) 2 🗷 1 E. Applications Lowest Highest 1. Overall application of course to current duties. 4 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Was the course length appropriate for the material covered? Adequate Too long Too Short G. Did you complete necessary prerequisites listed on profile? X Yes If yes, were they appropriate? List any additional prerequisite(s) you think are necessary, H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D DCS **OSES X**OEEAS OTSO **OASSIS** OESAE OTHER \Box ODS ORSIS NAME (optional): Series Job Title

Systems Training and Communications Branch Course Evaluation Technical Training for Professional Development Course Title and Number: FILE-AID FOR Date: **Primary Instructor:** RDX (DB2 CURRICULUM) -- #031470 **AUGUST 18, 2009** DAVE SILVERBERG A. Course Objectives: Please check the box next to the number that represents the degree to which specific course objectives were met. (1 LOW → 5 HIGH) Degree to which specific course objectives were met (use the numbered objectives on the course profile) Lowest \rightarrow Highest \rightarrow Highest Lowest 1. 1 2 3 4 7. $1 \square$ $\overline{2}$ 3 4 5 5 7 2. 1 2 3 4 5 🕡 8. 1 2 3 4 5 3. 1 2 3 5 1 9 $\overline{2}$ 3 5 4 1 🔲 4 5 W 10. 4. $1 \square$ 2 3 4 1 2 3 4 5 5. 1 2 3 4 5 11. 1 $\overline{2}$ 3 4 5 1 2 5 12. 2 3 5 6. 3 $4 \square$ 1 4 B. Course Content and Design Highest Lowest 1. Learning objectives were organized and clear. 3 🔲 1 2 4 5 U 2 Effectiveness of methodology (lecture, readings, demo 2 1 3 ┌ 4 3. Sufficient exercises were used to reinforce and measure learning 1 2 3 4 C. Quality of Instruction Lowest Highest 1. Instructor's knowledge of subject 3 🔲 4 1 [2 [5 V 2. Responsiveness to questions or need for help. 1[2 3 4 3. Organization and presentation. 2 [3 1 [4 5 4. Presented adequate exercises/examples. 3 5 1 2 🖂 4 D. Course Administration Lowest Highest Course announcements, employee notifications were clear and prompt. 1 2 3 5 4 4 Facilities were conductive to learning. 2 [3 [4 Appropriate computer resources were available. (check N/A if applicable) 2 3 4 E. Applications Lowest Highest 1. Overall application of course to current duties. 1 V2 3 4 2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary) F. Length of Course Was the course length appropriate for the material covered? Too Short Too long Adequate G. Did you complete necessary prerequisites listed on profile? \textstyres N/A If yes, were they appropriate? List any additional prerequisite(s) you think are necessary. H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary Explain low scores (1 or 2) for sections A-D **OSES D**CS OEEAS OASSIS OESAE OTSO **OTHER** ODS ORSIS NAME (optional): Job Title TRAM Leady 3210 Grade Series

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