

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 (5)			7. 1 2 3 4 (5)		
2. 1 2 3 4 (5)			8. 1 2 3 4 (5)		
3. 1 2 3 4 (5)			9. 1 2 3 4 5		
4. 1 2 3 4 (5)			10. 1 2 3 4 5		
5. 1 2 3 4 (5)			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 3 4 (5)	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 (5)	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 (5)	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 (5)	
2. Responsiveness to questions or need for help.	1	2 3 4 (5)	
3. Organization and presentation.	1	2 3 4 (5)	
4. Presented adequate exercises/examples.	1	2 3 4 (5)	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 (5)	
2. Facilities were conducive to learning.	1	2 3 4 (5)	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 (5)	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 (5)	
2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)			

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☐ 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

<input type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input type="checkbox"/> OSES
<input checked="" type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional):

Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER #311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 5			7. 1 2 3 4 5		
2. 1 2 3 4 5			8. 1 2 3 4 5		
3. 1 2 3 4 5			9. 1 2 3 4 5		
4. 1 2 3 4 5			10. 1 2 3 4 5		
5. 1 2 3 4 5			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 3 4 5	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 5	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 5	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 5	
2. Responsiveness to questions or need for help.	1	2 3 4 5	
3. Organization and presentation.	1	2 3 4 5	
4. Presented adequate exercises/examples.	1	2 3 4 5	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 5	
2. Facilities were conducive to learning.	1	2 3 4 5	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 5	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 5	

2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)

How to use scripts in XPEDITER AND RUN XPEDITER IN BATCH

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ 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

THE CLASS ROOM WAS TOO COLD IN TEMP.

<input type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input checked="" type="checkbox"/> OSES
<input type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional):

Series

Grade

Job Title

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 (4) 5			7. 1 2 3 (4) 5		
2. 1 2 3 (4) 5			8. 1 2 3 (4) 5		
3. 1 2 3 (4) 5			9. 1 2 3 4 5		
4. 1 2 3 (4) 5			10. 1 2 3 4 5		
5. 1 2 3 (4) 5			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 3 (4) 5	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 (4) 5	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 (4) 5	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 (5)	
2. Responsiveness to questions or need for help.	1	2 3 (4) 5	
3. Organization and presentation.	1	2 3 4 5	
4. Presented adequate exercises/examples.	1	2 3 4 5	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 (5)	
2. Facilities were conducive to learning.	1	2 3 4 (5)	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 (5)	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 (3) 4 5	
2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)			

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☐ 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

<input checked="" type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input type="checkbox"/> OSES
<input type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional):

Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 (5)			7. 1 2 3 4 (5)		
2. 1 2 3 4 (5)			8. 1 2 3 4 (5)		
3. 1 2 3 4 (5)			9. 1 2 3 4 5		
4. 1 2 3 4 (5)			10. 1 2 3 4 5		
5. 1 2 3 4 (5)			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 3 4 (5)	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 (5)	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 (5)	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 (5)	
2. Responsiveness to questions or need for help.	1	2 3 4 (5)	
3. Organization and presentation.	1	2 3 4 (5)	
4. Presented adequate exercises/examples.	1	2 3 4 (5)	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 (5)	
2. Facilities were conducive to learning.	1	2 3 4 (5)	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 (5)	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 (5)	
2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)			

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ Adequate ☐ Too long

G. Did you complete necessary prerequisites listed on profile? ☒ Yes ☐ No ☐ N/A

If yes, were they appropriate? yes

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

Grade

GS-09

Job Title

IT

Specialist

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 (5)			7. 1 2 3 4 (5)		
2. 1 2 3 4 (5)			8. 1 2 3 4 (5)		
3. 1 2 3 4 (5)			9. 1 2 3 4 5		
4. 1 2 3 4 (5)			10. 1 2 3 4 5		
5. 1 2 3 4 (5)			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 3 4 (5)	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 (5)	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 (5)	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 (5)	
2. Responsiveness to questions or need for help.	1	2 3 4 (5)	
3. Organization and presentation.	1	2 3 4 (5)	
4. Presented adequate exercises/examples.	1	2 3 4 (5)	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 (5)	
2. Facilities were conducive to learning.	1	2 3 4 (5)	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 (5)	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 (5)	
2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)			

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ 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

<input type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input type="checkbox"/> OSES
<input type="checkbox"/> OASIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input checked="" type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional):

Series 2210 Grade 12 Job Title IT SPECIALIST

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 5			7. 1 2 3 4 5		
2. 1 2 3 4 5			8. 1 2 3 4 5		
3. 1 2 3 4 5			9. 1 2 3 4 5		
4. 1 2 3 4 5			10. 1 2 3 4 5		
5. 1 2 3 4 5			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 3 4 5	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 5	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 5	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 5	
2. Responsiveness to questions or need for help.	1	2 3 4 5	
3. Organization and presentation.	1	2 3 4 5	
4. Presented adequate exercises/examples.	1	2 3 4 5	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 5	
2. Facilities were conducive to learning.	1	2 3 4 5	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 5	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 5	

2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)

THIS WOULD BE VERY USEFUL IN CICS

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ Adequate ☐ Too long

G. Did you complete necessary prerequisites listed on profile? ☒ Yes ☐ No ☐ N/A

If yes, were they appropriate? Yes

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

<input type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input type="checkbox"/> OSES
<input type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input checked="" type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional):

Series

Grade

Job Title

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER #311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 5			7. 1 2 3 4 5		
2. 1 2 3 4 5			8. 1 2 3 4 5		
3. 1 2 3 4 5			9. 1 2 3 4 5		
4. 1 2 3 4 5			10. 1 2 3 4 5		
5. 1 2 3 4 5			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 3 4 5	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 5	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 5	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 5	
2. Responsiveness to questions or need for help.	1	2 3 4 5	
3. Organization and presentation.	1	2 3 4 5	
4. Presented adequate exercises/examples.	1	2 3 4 5	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 5	
2. Facilities were conducive to learning.	1	2 3 4 5	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 5	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 5	

2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)

Multiple Commands used for Xpediter and debugging.

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ Adequate ☐ Too long

G. Did you complete necessary prerequisites listed on profile? ☒ Yes ☐ No ☐ N/A

If yes, were they appropriate? YES

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

<input type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input type="checkbox"/> OSES
<input type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input type="checkbox"/> ORSIS	<input checked="" type="checkbox"/> OTHER

NAME (optional):

Series

Grade

Job Title

IT Specialist

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 (5)			7. 1 2 3 4 (5)		
2. 1 2 3 4 (5)			8. 1 2 3 4 (5)		
3. 1 2 3 4 (5)			9. 1 2 3 4 5		
4. 1 2 3 4 (5)			10. 1 2 3 4 5		
5. 1 2 3 4 (5)			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 3 4 (5)	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 (5)	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 (5)	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 (5)	
2. Responsiveness to questions or need for help.	1	2 3 4 (5)	
3. Organization and presentation.	1	2 3 4 (5)	
4. Presented adequate exercises/examples.	1	2 3 4 (5)	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 (5)	
2. Facilities were conducive to learning.	1	2 3 4 (5)	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 (5)	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 (5)	
2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)			

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ 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

☐ DCS

☐ OEEAS

☐ OSES

☐ OASSIS

☐ OESAE

☐ OTSO

☐ ODS

☒ ORSIS

☐ OTHER

NAME (optional): _____

Series _____

Grade _____

Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1	2	3	4	5	7. 1
2. 1	2	3	4	5	8. 1
3. 1	2	3	4	5	9. 1
4. 1	2	3	4	5	10. 1
5. 1	2	3	4	5	11. 1
6. 1	2	3	4	5	12. 1

B. Course Content and Design

	Lowest	→			Highest
1. Learning objectives were organized and clear.	1	2	3	4	5
2. Effectiveness of methodology (lecture, readings, demo	1	2	3	4	5
3. Sufficient exercises were used to reinforce and measure learning	1	2	3	4	5

C. Quality of Instruction

	Lowest	→			Highest
1. Instructor's knowledge of subject	1	2	3	4	5
2. Responsiveness to questions or need for help.	1	2	3	4	5
3. Organization and presentation.	1	2	3	4	5
4. Presented adequate exercises/examples.	1	2	3	4	5

D. Course Administration

	Lowest → Highest				
1. Course announcements, employee notifications were clear and prompt.	1	2	3	4	5
2. Facilities were conducive to learning.	1	2	3	4	5
3. Appropriate computer resources were available. (check N/A if applicable)	1	2	3	4	5

E. Applications

	Lowest	→			Highest
1. Overall application of course to current duties.	1	2	3	4	5
2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)					

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☐ 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

☐ DCS

☐ OASSIS

☐ ODS

☒ OEAS

☐ OESAE

☐ ORSIS

☐ OSES

☐ OTSO

☐ OTHER

NAME (optional):

Series

Grade

Job Title

THOM MATSON

13

ET CONSULTANT

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITER
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 4 (5)			7. 1 2 3 4 (5)		
2. 1 2 3 4 (5)			8. 1 2 3 4 (5)		
3. 1 2 3 4 (5)			9. 1 2 3 4 5		
4. 1 2 3 4 (5)			10. 1 2 3 4 5		
5. 1 2 3 4 (5)			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 3 4 (5)	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 (5)	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 4 (5)	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 (5)	
2. Responsiveness to questions or need for help.	1	2 3 4 (5)	
3. Organization and presentation.	1	2 3 4 (5)	
4. Presented adequate exercises/examples.	1	2 3 4 (5)	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 (5)	
2. Facilities were conducive to learning.	1	2 3 4 (5)	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 (5)	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 4 (5)	

2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)

USE OF XPEDITER AS BOTH A TESTING AND
Debugging Tool

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ Adequate ☐ Too long

G. Did you complete necessary prerequisites listed on profile? ☒ Yes ☐ No ☐ N/A

If yes, were they appropriate? YES

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

I wished the course included DB2 examples. This
would require DB2 & Endevor Prerequisites which I believe
should be required.

<input type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input type="checkbox"/> OSES
<input type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input checked="" type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional): ED Soccas

Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: TSO: XPEDITOR
#311770

Date: 03/11-13/09

Primary Instructor: Dave Silverberg

A. Course Objectives:

(1 LOW → 5 HIGH)

Circle Degree to which specific course objectives were met or Highlight (use the numbered objectives on the course profile)

Lowest	→	Highest	Lowest	→	Highest
1. 1 2 3 <u>4</u> 5			7. 1 2 3 <u>4</u> 5		
2. 1 2 3 4 <u>5</u>			8. 1 2 <u>3</u> <u>4</u> 5		
3. 1 2 3 4 <u>5</u>			9. 1 2 <u>3</u> 4 5		
4. 1 2 3 <u>4</u> 5			10. 1 2 3 4 5		
5. 1 2 <u>3</u> 4 5			11. 1 2 3 4 5		
6. 1 2 3 4 <u>5</u>			12. 1 2 3 4 5		

B. Course Content and Design

	Lowest	→	Highest
1. Learning objectives were organized and clear.	1	2 3 <u>4</u> 5	
2. Effectiveness of methodology (lecture, readings, demo)	1	2 3 4 <u>5</u>	
3. Sufficient exercises were used to reinforce and measure learning	1	2 3 <u>4</u> 5	

C. Quality of Instruction

	Lowest	→	Highest
1. Instructor's knowledge of subject	1	2 3 4 <u>5</u>	
2. Responsiveness to questions or need for help.	1	2 3 4 <u>5</u>	
3. Organization and presentation.	1	2 3 <u>4</u> 5	
4. Presented adequate exercises/examples.	1	2 3 <u>4</u> 5	

D. Course Administration

	Lowest	→	Highest
1. Course announcements, employee notifications were clear and prompt.	1	2 3 4 <u>5</u>	
2. Facilities were conducive to learning.	1	2 3 4 <u>5</u>	
3. Appropriate computer resources were available. (check N/A if applicable)	1	2 3 4 <u>5</u>	

E. Applications

	Lowest	→	Highest
1. Overall application of course to current duties.	1	2 3 <u>4</u> 5	

2. What new insights have you acquired as a result of taking this course? (Use back of form; if necessary)

How to debug C++ programs using TSO. Xpeditor, it will be very helpful in doing my current duties if the LIBR rewrite.

F. Length of Course (X in box of your choice)

Was the course length appropriate for the material covered? ☐ Too Short ☒ 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

<input type="checkbox"/> DCS	<input type="checkbox"/> OEEAS	<input type="checkbox"/> OSES
<input checked="" type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional):

Series 2210 Grade 13 Job Title IT Specialist