Linux tundementaly & Support

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1. I	dentify your shift.	Day	O Afternoon	○ Night					
2. I	dentify your status.	Permanent	O Seasonal	○ Term	1	2	3	4	5
3. I	had the basic knowl	edge and skills ne	ecessary to begin t	his training.	0	0	0	0	0
4.	The course objective	s focused on my j	ob tasks.		0	0	8	0	0
5. T	5. The course content matched the objectives.						0	0	0
6. T	6. The course materials helped me learn.						0	0	٥
7. 1	7. The course materials were easy to understand.						0	0	0
8. T	8. The learning activities encouraged my participation.						0	0	0
9. I	9. I practiced what I was taught.						0	0	0
10. Т	The course length was sufficient to deliver the content.					0	0	0	0
11. 1	received this training	g when I needed i	it.		0	0	0	0	0
12. T	The job aid materials	seem useful.			0	0	0	0	0
13. T	The test(s) were cons	istent with what I	was taught.		0	Ö	0	0	0
14. Т	The instructor(s) were	e prepared.			0	0	0	0	9
15. T	5. The instructor(s) were available for individual help.					0	0	0	٠
16. 7	6. The instructor(s)' responses helped me learn.					0	0	0	0
17. 7	The instructor(s)' pre	sentations helped	me learn.		0	0	0	0	0

Please do not attempt to copy this form. Duplicated forms cannot be scanned.

Thank you for your feedback.

evaluation is anonymous and should be completed on official time. Participation Your feedback provides important information to improve this course. This is voluntary but strongly encouraged. Thank you.

100

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number	360418
3 H. C. Strand II (1971) I. P. C. Strand	

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1. Identify your shift.	© Day	O Afternoon	○ Night					
2. Identify your status.	@ Permanent	○ Seasonal	○ Term	1	2	3	4	5
3. I had the basic know	ledge and skills no	ecessary to begin	this training.	0	0	0	0	0
4. The course objective	es focused on my	job tasks.		0	0	0	0	0
5. The course content r	natched the object	ives.		0	0	0	0	0
6. The course materials	6. The course materials helped me learn.						0	0
7. The course materials	s were easy to und	erstand.		0	0	0	0	0
The learning activities encouraged my participation.					0	0	0	0
9. I practiced what I wa	9. I practiced what I was taught.				0	0	0	3
10. The course length w	as sufficient to de	liver the content.		0	0	0	0	0
11. I received this training	ng when I needed	it.		0	0	0	0	0
12. The job aid material	s seem useful.			0	0	0	0	0
13. The test(s) were con-	sistent with what I	was taught.		0	0	0	0	0
14. The instructor(s) we	re prepared.			0	0	0	0	(3)
15. The instructor(s) we	5. The instructor(s) were available for individual help.				0	0	0	0
16. The instructor(s)' res	sponses helped me	e learn.		0	0	0	0	9
17. The instructor(s)' pro	esentations helped	l me learn.		0	0	0	0	(3)

Integrated Training Evaluation and Measurement Services (ITEMS)

SROOM CB

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

3 Neither disagree nor agree; no opinion one way or the other.

Agree

4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	Day	O Afternoon	O Night					
2.	Identify your status.	@ Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic know	ledge and skills no	ecessary to begin	this training.	0	0	0	0	0
4.	The course objective	es focused on my j	ob tasks.		0	0	0	0	0
5.	The course content n	natched the object	ives.		0	0	0	0	0
6.	The course materials	helped me learn.			0	0	0	0	0
7.	The course materials	0	0	0	0	0			
8.	The learning activities encouraged my participation.					0	0	0	0
9.	I practiced what I wa	is taught.			0	0	0	0	0
10.	The course length wa	as sufficient to del	liver the content.		0	0	0	0	0
11.	I received this training	ng when I needed	it.		0	0	0	0	0
12.	The job aid materials	s seem useful.			0	0	0	0	0
13.	The test(s) were cons	sistent with what l	was taught.		0	0	0	0	0
14.	The instructor(s) wer	re prepared.			0	0	0	0	0
15.	The instructor(s) wer	re available for inc	lividual help.		0	0	0	0	0
16.	The instructor(s)' res	sponses helped me	e learn.		0	0	0	0	0
17	The instructor(s)' pre	esentations helped	l me learn		0	0	0	0	0

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 360418

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1. Identify your shift. Day Afternoon Night					
2. Identify your status.	1	2	3	4	5
3. I had the basic knowledge and skills necessary to begin this training.	0	0	0	0	0
4. The course objectives focused on my job tasks.	0	0	8	0	0
5. The course content matched the objectives.	0	0	0	0	0
6. The course materials helped me learn.	0	0	0	0	0
7. The course materials were easy to understand.	0	0	0	0	0
8. The learning activities encouraged my participation.	0	0	0	9	0
9. I practiced what I was taught.	0	0	0	0	9
10. The course length was sufficient to deliver the content.	0	0	0	0	0
11. I received this training when I needed it.	0	0	@	0	0
12. The job aid materials seem useful.	0	0	0	0	6
13. The test(s) were consistent with what I was taught.	0	0	0	0	0
14. The instructor(s) were prepared.	0	0	0	0	0
15. The instructor(s) were available for individual help.	0	0	0	0	0
16. The instructor(s)* responses helped me learn.	0	0	0	0	0
17. The instructor(s)* presentations helped me learn.	0	0	0	0	0

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 360418

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Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	Day	O Afternoon	○ Night					
2.	Identify your status.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	edge and skills no	ecessary to begin	this training.	0	0	0	0	0
4.	The course objective	s focused on my j	ob tasks.		0	0	0	6	0
5.	i. The course content matched the objectives.						0	0	8
6.	6. The course materials helped me learn.						0	0	•
7.	7. The course materials were easy to understand.						0	0	(2)
8.	8. The learning activities encouraged my participation.						0	0	0
9.	I practiced what I was taught.						٠	0	0
10.	The course length was sufficient to deliver the content.					0	0	0	•
11.	I received this training	g when I needed	it.		0	0	0	0	•
12.	The job aid materials	seem useful.	# 1. *		0	0	0	•	0
13.	The test(s) were cons	istent with what I	was taught.		0	0	0	•	0
14.	The instructor(s) were	e prepared.			0	0	0	0	6
15.	5. The instructor(s) were available for individual help.				0	0	0	0	0
16.	6. The instructor(s)' responses helped me learn.					0	0	0	۹
17.	The instructor(s)' pre		0	0	0	0	0		

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 360 41 8

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

Identify your shift. Day	○ Afternoon	○ Night					
2. Identify your status. See Pern	nanent O Seasonal	○ Term	1	2	3	4	5
3. I had the basic knowledge and	skills necessary to begin	this training.	0	0	0	0	0
4. The course objectives focused	l on my job tasks.		0	0	0	0	0
5. The course content matched th	0	0	0	0	6		
6. The course materials helped m	ne learn.		0	0	0	0	8
7. The course materials were easy	7. The course materials were easy to understand.						•
8. The learning activities encoura	0	0	0	0	©		
9. I practiced what I was taught.		0	0	0	0	0	
10. The course length was sufficie	ent to deliver the content.		0	0	0	0	6
11. I received this training when I	needed it.		0	0	0	0	(4)
12. The job aid materials seem use	eful.		0	0	0	0	0
13. The test(s) were consistent wit	h what I was taught.		0	0	0	0	6
14. The instructor(s) were prepare	d.		0	0	0	0	0
15. The instructor(s) were available		0	0	0	0	@	
16. The instructor(s)' responses he	elped me learn.		0	0	0	0	@
17. The instructor(s)' presentation	s helped me learn.		0	0	0	0	6

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 360418

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1. Identify your shift.	○ Afternoon	○ Night					
2. Identify your status.	ent O Seasonal	○ Term	1	2	3	4	5
3. I had the basic knowledge and ski	ills necessary to begin	this training.	0	0	0	0	0
4. The course objectives focused on	my job tasks.		0	0	0	0	0
5. The course content matched the o	. The course content matched the objectives.						0
6. The course materials helped me le	6. The course materials helped me learn.						0
7. The course materials were easy to	understand.		0	0	0	0	0
8. The learning activities encourage	0	0	0	0	0		
9. I practiced what I was taught.	0	0	0	0	0		
10. The course length was sufficient	to deliver the content.		0	0	0	0	0
11. I received this training when I nee	eded it.		0	0	0	0	0
12. The job aid materials seem useful	.		0	0	0	0	0
13. The test(s) were consistent with v	vhat I was taught.		0	0	0	0	0
14. The instructor(s) were prepared.			0	0	0	0	0
15. The instructor(s) were available for	5. The instructor(s) were available for individual help.				0	0	1
16. The instructor(s)* responses helpe	ed me learn.		0	0	0	0	0
17. The instructor(s)' presentations h	elped me learn.		0	0	0	0	Ø

Integrated Training Evaluation and Measurement Services (ITEMS)

SSROOM CB

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number _ 360 418

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	Day	O Afternoon	O Night					
2.	Identify your status.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	edge and skills no	ecessary to begin	this training.	0	0	0	0	0
4.	The course objective	s focused on my j	ob tasks.		0	0	0	0	0
5.	The course content m	natched the object	ives.		0	0	0	0	0
6.	The course materials		0	0	0	0	0		
7.	The course materials	0	0	0	0	0			
8.	The learning activitie	0	0	0	0	0			
9.	I practiced what I was taught.					0	0	0	(2)
10.	The course length wa	is sufficient to del	liver the content.		0	0	0	0	6
11.	I received this trainin	g when I needed	it.		0	0	•	0	0
12.	The job aid materials	seem useful.			0	0	0	0	@
13.	The test(s) were cons	istent with what I	was taught.		0	0	0	0	0
14.	The instructor(s) wer	e prepared.			0	0	0	1	0
15.	The instructor(s) wer	e available for inc	lividual help.		0	0	0	0	(3)
16.	The instructor(s)' res	ponses helped me	learn.		0	0	0	0	0
17.	The instructor(s)' pre	sentations helped	me learn.		0	0	0	0	0

Integrated Training Evaluation and Measurement Services (ITEMS)

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number	260418
TOLO CIGOO HUITIDO	

Scale and Rating Definitions:

Strongly Disagree	1	This item is true none of the time or your response is No.
Disagree	2	This item is true some of the time.
Neutral	3	Neither disagree nor agree; no opinion one way or the other.
		This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	② Day	O Afternoon	○ Night					
2,	Identify your status.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	edge and skills no	ecessary to begin	this training.	0	0	0	0	0
4.	The course objective	s focused on my j	ob tasks.		0	0	3	0	0
5.	The course content m	0	0	0	0	(3)			
6.	6. The course materials helped me learn.						0	0	3
7.	7. The course materials were easy to understand.						0	0	0
8.	8. The learning activities encouraged my participation.						0	0	0
9,	9. I practiced what I was taught.						0	0	0
10.	The course length was sufficient to deliver the content.						0	0	٥
11.	I received this trainin	g when I needed	it.		0	0	0	0	0
12.	The job aid materials	seem useful.			0	0	0	0	(3)
13.	The test(s) were cons	sistent with what I	was taught.		0	0	0	0	0
14.	The instructor(s) wer	e prepared.			0	0	0	0	(3)
15.	The instructor(s) were available for individual help.					0	0	0	(3)
16.	6. The instructor(s)' responses helped me learn.					0	0	0	0
17.	The instructor(s)' pre		0	0	0	0	(3)		

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

.300918

ACES Class Number

14. The instructor(s) were prepared.

15. The instructor(s) were available for individual help.

16. The instructor(s)' responses helped me learn.

17. The instructor(s)' presentations helped me learn.

Scale and Rating Definitions.					
Strongly Disagree 2 This item is true none of the time or you be a superior of the time of your disagree and agree; no opinior agree and agree and agree are agree; no opinior agree agree; no opinior agree agree agree agree agree are agree; no opinior agree a	n one wa	ay or t r is Ye	he oth	er.	
Identify your shift.					
2. Identify your status. O Permanent O Seasonal O Term	1	2	3	4	5
3. I had the basic knowledge and skills necessary to begin this training.	0	0	0	0	0
4. The course objectives focused on my job tasks.	0	0	0	0	0
5. The course content matched the objectives.	0	0	0	@	0
6. The course materials helped me learn.	0	0	0	0	0
7. The course materials were easy to understand.	0	0	0	0	0
8. The learning activities encouraged my participation.	0	0	0	0	0
9. I practiced what I was taught.	0	0	0	0	0
10. The course length was sufficient to deliver the content.	0	0	0	0	0
11. I received this training when I needed it.	0	0	0	0	0
12. The job aid materials seem useful.	0	0	0	0	0
13. The test(s) were consistent with what I was taught.	0	0	0	@	0

Integrated Training Evaluation and Measurement Services (ITEMS)

SSROOM CB

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 360418

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	Day	O Afternoon	O Night					
2.	Identify your status.	@ Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic know	ledge and skills n	ecessary to begin	this training.	0	0	0	0	0
4.	The course objective	es focused on my	job tasks.		0	0	Ø	0	0
5.	The course content n	natched the object	ives.		0	0	0	0	0
6.	The course materials	helped me learn.			0	0	0	0	9
7.	The course materials	were easy to und	erstand.		0	0	0	0	0
8.	The learning activitie	es encouraged my	participation.		0	0	0	9	0
9.	. I practiced what I wa	is taught.			0	0	0	0	0
10.	. The course length wa	as sufficient to de	liver the content.		0	0	0	0	0
11.	I received this training	ng when I needed	it.		0	0	8	0	0
12	. The job aid materials	s seem useful.			0	0	0	0	0
13	. The test(s) were cons	sistent with what	was taught.		0	0	0	0	@
14	. The instructor(s) wer	re prepared.			0	0	0	0	0
15	. The instructor(s) wer	re available for in	dividual help.		0	0	0	0	0
16	. The instructor(s)' res	sponses helped me	e learn.		0	0	0	0	0
17	. The instructor(s)' pre	esentations helped	l me learn.		0	0	0	0	3

Integrated Training Evaluation and Measurement Services (ITEMS) CLASSROOM CBT Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 36 0418

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	Day	O Afternoon	○ Night					
2.	Identify your status.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	ledge and skills no	ecessary to begin	this training.	0	0	0	6	0
4.	The course objective	es focused on my j	job tasks.		0	0	0	0	0
5.	The course content m	natched the object	ives.		0	0	0	@	0
6.	The course materials	helped me learn.			0	0	0	0	0
7.	The course materials	were easy to und	erstand.		0	0	0	0	0
8.	The learning activitie	es encouraged my	participation.		0	0	0	0	0
9.	I practiced what I wa	s taught.			@	0	0	0	0
10.	The course length wa	as sufficient to de	liver the content.		0	0	0	6	0
11.	I received this training	g when I needed	it.		0	0	©	0	0
12.	The job aid materials	seem useful.			0	0	0	@	0
13.	The test(s) were cons	sistent with what l	was taught.		0	0	0	6	0
14.	The instructor(s) wer	re prepared.			0	0	0	0	©
15.	The instructor(s) wer	re available for inc	dividual help.		0	0	0	@	0
16.	The instructor(s) [†] res	ponses helped me	e learn.		0	0	0	0	0
17.	The instructor(s)' pre	esentations helped	l me learn.		0	0	6	0	0

Please do not attempt to copy this form. Duplicated forms cannot be scanned.

Thank you for your feedback.

evaluation is anonymous and should be completed on official time. Participation Your feedback provides important information to improve this course. This is voluntary but strongly encouraged. Thank you.

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number _ 360418

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

I. Identify your shift.					
2. Identify your status. Permanent Seasonal Term	1	2	3	4	5
3. I had the basic knowledge and skills necessary to begin this training.	0	0	•	0	0
4. The course objectives focused on my job tasks.	0	0	0	0	•
5. The course content matched the objectives.	0	0	0	0	•
6. The course materials helped me learn.	0	0	0	0	•
7. The course materials were easy to understand.	0	0	0	0	•
8. The learning activities encouraged my participation.	0	0	0	0	0
9. I practiced what I was taught.	0	0	0	•	0
10. The course length was sufficient to deliver the content.	0	0	0	0	•
11. I received this training when I needed it.	0	0	0	0	
12. The job aid materials seem useful.	0	0	0	0	8
13. The test(s) were consistent with what I was taught.	0	0	0	0	
14. The instructor(s) were prepared.	0	0	0	0	4
15. The instructor(s) were available for individual help.	0	0	0	0	•
16. The instructor(s)' responses helped me learn.	0	0	0	0	•
17. The instructor(s)' presentations helped me learn.	0	0	0	0	•

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 3604/8

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	© Day	Afternoon	○ Night					
2.	Identify your status.	Q Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	edge and skills no	ecessary to begin	this training.	0	0	0	0	Ø
4.	The course objective	es focused on my	job tasks.		0	0	0	0	0
5.	The course content m	natched the object	ives.		0	0	0	0	0
6.	The course materials	helped me learn.			0	0	0	0	0
7.	The course materials	were easy to und	erstand.		0	0	0	0	0
8.	The learning activitie	es encouraged my	participation.		0	0	Ø	0	0
9.	I practiced what I wa	s taught.			0	0	0	0/	0
10.	The course length wa	as sufficient to de	liver the content.		0	0	0	0	0
11.	I received this training	g when I needed	it.		0	0	0	0	0
12.	The job aid materials	seem useful.			0	0	0	0	0
13.	The test(s) were cons	sistent with what I	was taught.		0	0	0	0	Ø
14.	The instructor(s) wer	e prepared.			0	0	0	0	0
15.	The instructor(s) wer	e available for inc	dividual help.		0	0	0	0	0
16.	The instructor(s)' res	ponses helped me	e learn.	- A11	0	0	0	0	0
17.	The instructor(s)' pre	esentations helped	l me learn.		0	0	0	0	0

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number 360418

Scale and Rating Definitions:

Strongly Disagree 1 This item is true none of the time or your response is No.

Disagree 2 This item is true some of the time.

Neutral 3 Neither disagree nor agree; no opinion one way or the other.

Agree 4 This item is true most of the time.

Strongly Agree 5 This item is true all of the time or your answer is Yes.

Not Applicable Leave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1. Identify your shift.	Day	O Afternoon	O Night					
2. Identify your status.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3. I had the basic know	ledge and skills n	ecessary to begin	this training.	0	0	0	0	(3)
4. The course objective	es focused on my	job tasks.		0	0	0	(6)	0
5. The course content r	matched the object	ives.		0	0	0	6	0
6. The course materials	s helped me learn.			0	0	0	6	0
7. The course materials	s were easy to und	erstand.	87	0	0	0	@	0
8. The learning activiti	es encouraged my	participation.		0	0	0	Ø	0
9. I practiced what I wa	as taught.			0	0	0	(3)	0
10. The course length w	as sufficient to de	liver the content.		0	0	0	9	0
11. I received this training	ng when I needed	it,		0	0	0	0	0
12. The job aid material	s seem useful.			0	0	0	0	0
13. The test(s) were con	sistent with what l	was taught.		0	0	0	0	@
14. The instructor(s) we	re prepared.			0	0	0	9	0
15. The instructor(s) we	re available for inc	lividual help.		0	0	0	0	0
16. The instructor(s)* re-	sponses helped me	e learn.		0	0	0	0	0
17. The instructor(s)' pr	esentations helped	me learn.		0	0	0	0	0

Integrated Training Evaluation and Measurement Services (ITEMS)

CLASSROOM CBT

Standardized Level 1 - Trainee's Course Evaluation

Use this form to evaluate courses delivered in a classroom setting that contain computer-based training.

ACES Class Number	360418
[1] [1] [1] [1] [1] [2] [2] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	

Scale and Rating Definitions:

	1000	
Strongly Disagree	1	This item is true none of the time or your response is No.
Disagree	2	This item is true some of the time.
Neutral	3	Neither disagree nor agree; no opinion one way or the other
Agree	4	This item is true most of the time.
Strongly Agree	5	This item is true all of the time or your answer is Yes.
Not Applicable	L	eave the item blank.

Instructions: Use a Number 2 pencil or dark (not red) ink to complete this form. Heavily darken the "bubble" that corresponds with your response.

1.	Identify your shift.	② Day	O Afternoon	○ Night					
2.	Identify your status.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	edge and skills no	ecessary to begin	his training.	0	0	@	0	0
4.	The course objective	s focused on my j	job tasks.		0	0	0	0	0
5.	The course content m	natched the object	ives.		0	0	0	0	0
6.	The course materials	helped me learn.			0	0	9	0	0
7.	The course materials	were easy to unde	erstand.		0	0	6	0	0
8.	The learning activitie	es encouraged my	participation.		0	0	0	0	0
9.	I practiced what I was	s taught.			0	0	0	0	9
10.	The course length wa	s sufficient to del	liver the content.		0	0	0	0	1
11.	I received this trainin	g when I needed	it.		0	0	0	0	0
12.	The job aid materials	seem useful.			0	0	0	•	0
13.	The test(s) were cons	sistent with what I	was taught.		0	0	0	9	0
14.	The instructor(s) wer	e prepared.			0	0	0	0	9
15.	The instructor(s) wer	e available for inc	dividual help.		0	0	0	0	6
16.	The instructor(s)' res	ponses helped me	e learn.		0	0	0	(3)	0
17.	The instructor(s)' pre	sentations helped	me learn.		0	0	0	0	0

1 - Strongly Disagree 2 - Disagree 3 - Neutral

4 - Agree

5 - Strongly Agree

				_	=
	1	2	3	4	
I was able to control the pace of my learning.	0	0	0	0	(
 I was able to control the direction of my learning. 	0	9	0	0	(
26. The format helped me learn.	0	0	0	0	(
27. The feedback on my actions was helpful.	0	0	•	0	(
28. The computer-based portion of this training was trouble-free.	0	0	0	0	(
29. The computer response time was adequate.	0	0	0	0	4
30. The software/courseware was easy to use.	0	0	0	8	(
31. I could read the screens easily.	0	0	0	0	4
32. The video was clear.	0	0	0	0	(
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	(
	14 144 144				
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very S level of satisfaction with:	atisfied)	to de	scribe	your	
level of satisfaction with:	atisfied)	to de	O	O	(
level of satisfaction with: 35. Notification to attend this training in time to make arrangements.	atisfied)	0 0	O S	your<!--</td--><td></td>	
level of satisfaction with: 35. Notification to attend this training in time to make arrangements. 36. Accommodation of my reported special needs.	atisfied)	0 0	scribe	your<!--</td--><td></td>	
	atisfied)	0 0	ScribeOOO	0	(
level of satisfaction with: 35. Notification to attend this training in time to make arrangements. 36. Accommodation of my reported special needs. 37. Availability of training materials.	atisfied)	0 0	ScribeOOOO	0 0 0	(
level of satisfaction with: 35. Notification to attend this training in time to make arrangements. 36. Accommodation of my reported special needs. 37. Availability of training materials. 38. Sufficient training supplies to help me learn.	atisfied)	0 0		0 0 0 0	(
level of satisfaction with: 35. Notification to attend this training in time to make arrangements. 36. Accommodation of my reported special needs. 37. Availability of training materials. 38. Sufficient training supplies to help me learn. 39. Sufficient training equipment to help me learn.	atisfied)	0 0 0 0 0 0	0 0 0 0 0	0 0 0 0 0 0	((((((((((((((((((((
level of satisfaction with: 35. Notification to attend this training in time to make arrangements. 36. Accommodation of my reported special needs. 37. Availability of training materials. 38. Sufficient training supplies to help me learn. 39. Sufficient training equipment to help me learn. 40. Adequacy of the training facility to support learning.	0 0 0 0	0 0 0 0 0 0		0 0 0 0 0 0	((((((((((((((((((((

Thank you for your feedback.

Catalog Number 73159 E

229941-1

1 - Strongly Disagree 2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.	1	2	3	4	5
24. I was able to control the pace of my learning.	0	0	0	•	C
25. I was able to control the direction of my learning.	0	0	0	0	C
26. The format helped me learn.	0	0	0	0	C
27. The feedback on my actions was helpful.	0	0	0	0	•
28. The computer-based portion of this training was trouble-free.	0	0	0	0	•
9. The computer response time was adequate.	0	0	0	0	0
0. The software/courseware was easy to use.	0	0	0	0	0
I could read the screens easily.	0	0	0	0	0
2. The video was clear.	0	0	0	0	0
3. The audio was clear. Item 34 is reserved.)	0	0	0	0	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Sevel of satisfaction with:	satisfied)	to de	scribe	your	
5. Notification to attend this training in time to make arrangements.	0	0	0	0	0
Accommodation of my reported special needs.	0	0	0	0	0
7. Availability of training materials.	0	0	0	0	0
8. Sufficient training supplies to help me learn.	0	0	0	0	@
9. Sufficient training equipment to help me learn.	0	0	0	0	0
Adequacy of the training facility to support learning.	0	0	0	0	0
This training, OVERALL.	0	0	0	0	0
2. The instructor(s), OVERALL.	0	0	0	0	9
Please use the space below for comments. Note: When referring to instr	ructors, t	se firs	t nam	e(s) or	ıly.
hich parts of the course were most valuable? The Sections	on go	and	< 0	nd	

Thank you for your feedback.

Catalog Number 73159 E

229941-1

1 - Strongly Disagree 2 - Disagree 3 - Neutral 4 - Agree 5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.				_	
	1	2	3	4	5
24. I was able to control the pace of my learning.	0	0	0	Q	(
25. I was able to control the direction of my learning.	0	0	0	0	C
26. The format helped me learn.	0	0	0	0	C
27. The feedback on my actions was helpful.	0	0	0	8	C
28. The computer-based portion of this training was trouble-free.	0	0	0	\otimes	(
29. The computer response time was adequate.	0	0	\odot	0	Q
30. The software/courseware was easy to use.	0	0	0	0	9
31. I could read the screens easily.	0	0	0	0	(
32. The video was clear.	0	0	0	0	C
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	C
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	itisfied)	to de	scribe	your	
 Notification to attend this training in time to make arrangements. 	0	0	0	0	9
 Accommodation of my reported special needs. 	0	0	0	0	C
37. Availability of training materials.	0	0	0	0	P
38. Sufficient training supplies to help me learn.	0	0	0	0	0
39. Sufficient training equipment to help me learn.	0	0	0	0	0
40. Adequacy of the training facility to support learning.	0	0	0	0	Q
41. This training, OVERALL.	0	0	0	O	C
	0	0	0	8	C
42. The instructor(s), OVERALL.			-	e(s) on	lv.

Thank you for your feedback.

Catalog Number 73159 E

229941-1

1 - Strongly Disagree 2 - Disagree 3 - Neutral 4 - Agree 5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.					=
	1	2	3	4	5
24. I was able to control the pace of my learning.	0	0	•	0	0
25. I was able to control the direction of my learning.	0	0		0	0
26. The format helped me learn.	0	0	0	0	
27. The feedback on my actions was helpful.	0	0	0	0	•
28. The computer-based portion of this training was trouble-free.	0	0	0	0	9
29. The computer response time was adequate.	0	0	0	0	•
30. The software/courseware was easy to use.	0	0	0	0	9
31. I could read the screens easily.	0	Ö	0	0	•
32. The video was clear.	0	0	0	0	
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	•
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	tisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0	•
36. Accommodation of my reported special needs.	0	0	0	0	0
37. Availability of training materials.	0	0	0	0	4
38. Sufficient training supplies to help me learn.	0	0	0	0	9
39. Sufficient training equipment to help me learn.	0	0	0	0	0
40 41 64 41 6 77 4	0	0	0	0	9
 Adequacy of the training facility to support learning. 	20.0	0	0	0	•
40. Adequacy of the training facility to support learning. 41. This training, OVERALL.	0				
41. This training, OVERALL.	0	0	0	0	•
	uctors, u	o ise firs	O at nam	0	•

Thank you for your feedback.

1 - Strongly Disagree 2 - Disagree 3 - Neutral

4 - Agree

5 - Strongly Agree

24. I was able to control the pace of my learning.25. I was able to control the direction of my learning.	1				=
		2	3	4	
25. I was able to control the direction of my learning	0	0	0	0	
25. I was able to control the direction of my learning.	0	۹	0	0	
26. The format helped me learn.	0	0	0	0	
27. The feedback on my actions was helpful.	0	0	0	0	
28. The computer-based portion of this training was trouble-free.	0	0	0	0	
29. The computer response time was adequate.	0	0	0	0	
30. The software/courseware was easy to use.	0	0	0	9	
31. I could read the screens easily.	0	0	0	0	
32. The video was clear.	0	0	0	0	
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	atisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0	
	0	0	٥	0	
 Accommodation of my reported special needs. 					
Accommodation of my reported special needs. Availability of training materials.	0	0	0	9	
	0	0	0	9	
37. Availability of training materials.	0 0	0	0 0 0	666	
37. Availability of training materials.38. Sufficient training supplies to help me learn.	0 0 0	0 0 0	0 0 0		
37. Availability of training materials.38. Sufficient training supplies to help me learn.39. Sufficient training equipment to help me learn.	0 0 0 0	0 0 0 0	0 0 0 0		

Thank you for your feedback.

1 - Strongly Disagree 2 - Disagree

3 - Neutral 4 - Agree 5 - Strongly Agree

4. I was able to control the pace of my learning. 5. I was able to control the direction of my learning. 6. The format helped me learn. 7. The feedback on my actions was helpful. 8. The computer-based portion of this training was trouble-free. 9. The computer response time was adequate.	0 0 0	0 0	3 0	4 2 2	5 0
5. I was able to control the direction of my learning. 6. The format helped me learn. 7. The feedback on my actions was helpful. 8. The computer-based portion of this training was trouble-free.	0 0 0 0	0 0 0	0 0	2	0
6. The format helped me learn. 7. The feedback on my actions was helpful. 8. The computer-based portion of this training was trouble-free.	0 0 0	0 0	0	Ø	0
7. The feedback on my actions was helpful. 8. The computer-based portion of this training was trouble-free.	0	0	0		
8. The computer-based portion of this training was trouble-free.	0	0		0	0
	0		0	0	0
9. The computer response time was adequate.		0	0	0	0
	0	0	0	0	0
The software/courseware was easy to use.	0	0	0	0	0
I could read the screens easily.	0	0	0	0	•
2. The video was clear.	0	0	0	0	0
3. The audio was clear. tem 34 is reserved.)	0	0	0	0	0
assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very evel of satisfaction with:	Satisfied)	to de	scribe	your	
5. Notification to attend this training in time to make arrangements.	0	0	0	0	0
5. Accommodation of my reported special needs.	0	0	0	0	0
7. Availability of training materials.	0	0	0	0	0
Sufficient training supplies to help me learn.	0	0	0	0	0
Sufficient training equipment to help me learn.	0	0	0	0	0
Adequacy of the training facility to support learning.	0	0	0	0	0
. This training, OVERALL.	0	0	0	0	0
2. The instructor(s), OVERALL.	0	0	0	0	9
Please use the space below for comments. Note: When referring to inst	tructors, i	ise fire	st nam	e(s) or	aly.

Thank you for your feedback.

Catalog Number 73159 E

1 - Strongly Disagree 2 - Disagree 3 - Neutral

4 - Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.					
	1	2	3	4	5
I was able to control the pace of my learning.	0	0	0	0	C
25. I was able to control the direction of my learning.	0	0	0	0	C
26. The format helped me learn.	0	0	0	3	C
27. The feedback on my actions was helpful.	0	0	0	0	C
28. The computer-based portion of this training was trouble-free.	0	0	0	0	C
29. The computer response time was adequate.	0	0	0	0	0
30. The software/courseware was easy to use.	0	0	0	0	Œ.
31. I could read the screens easily.	0	0	0	0	@
32. The video was clear.	0	0	0	0	6
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	itisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	@	C
36. Accommodation of my reported special needs.	0	0	0	0	C
37. Availability of training materials.	0	0	0	1	
	0	0	0	3	C
 Sufficient training supplies to help me learn. 	NAME OF TAXABLE PARTY.	0	0	0	C
 Sufficient training supplies to help me learn. Sufficient training equipment to help me learn. 	0		0	0	@
	0.0	0	\sim		
39. Sufficient training equipment to help me learn.	0 0	0	0	0	E
39. Sufficient training equipment to help me learn.40. Adequacy of the training facility to support learning.	0 0 0	0 0 0	0 0	0	@
39. Sufficient training equipment to help me learn. 40. Adequacy of the training facility to support learning. 41. This training, OVERALL.	o o o o uctors, u	O O O O O O	O O st nam	O O (e(s) or	e aly.

Thank you for your feedback.

Catalog Number 73159 E

229941-1

1 - Strongly Disagree 2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree

. 56	1	2 3	4	5
0 0	0	0 0	0	C
0 0	0	0 0	0	
0 0	0	0 0	0	C
0 0	0	0 0	0	C
0 0	0	0 0	0	C
0 0	0	0 0	0	C
0 0	0	0 0	0	C
0 0	0	0 0	0	C
0 0	0	0 0	0	
0 0	0	0 0	0	C
ed) to d	isfied	to describ	e your	
0 0	0	0 0	0	6
0 0	0	0 9	0	C
0	0	0 0	0	C
0	0	0 0	0	6
0	0	0 0	0	6
0 0	0	0 0	0	6
0 0	0	0 0	0	6
0	0	0 0	0	0
				o o o o o o e first name(s) or

Thank you for your feedback.

Catalog Number 73159 E

Which parts of the course were least valuable?_

229941-1

1 - Strongly Disagree 2 - Disagree 3 - Neutral 4 - Agree 5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.	70-2			1	
espekter till til en state for til til state skrive skrivet en til state fra et en sa til 1999 etter til 1990 e	1	2	3	4	5
I was able to control the pace of my learning.	0	0	0	0	•
25. I was able to control the direction of my learning.	0	0	0	0	6
26. The format helped me learn.	0	0	0	0	•
27. The feedback on my actions was helpful.	0	0	0	0	q
28. The computer-based portion of this training was trouble-free.	0	0	0	0	4
29. The computer response time was adequate.	0	0	0	0	•
30. The software/courseware was easy to use.	0	0	0	0	0
31. I could read the screens easily.	0	0	0	0	0
32. The video was clear.	0	0	0	0	9
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	C
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Sa level of satisfaction with:	tisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0	ê
 Accommodation of my reported special needs. 	0	0	0	0	C
37. Availability of training materials.	0	0	0	•	С
38. Sufficient training supplies to help me learn.	0	0	0	0	0
 Sufficient training equipment to help me learn. 	0	0	-0	0	•
40. Adequacy of the training facility to support learning.	0	0	0	0	0
11. This training, OVERALL.	0	0	0	0	(
12. The instructor(s), OVERALL.	0	0	0	0	•
Please use the space below for comments. Note: When referring to instru	etors, u	se firs	t nam	e(s) or	ıly.

Thank you for your feedback.

1 - Strongly Disagree 2 - Disagree 3 - Neutral 4 - Agree 5 - Strongly Agree

	Item numbers 18 to 23 are reserved for other class types.			- 0	1	
		1	2	3	4	5
	24. I was able to control the pace of my learning.	0	0	0	0	@
	25. I was able to control the direction of my learning.	0	0	0	0	0
	26. The format helped me learn.	0	0	0	0	0
	27. The feedback on my actions was helpful.	0	0	0	0	٥
	28. The computer-based portion of this training was trouble-free.	0	0	0	0	1
	29. The computer response time was adequate.	0	0	0	0	0
	30. The software/courseware was easy to use.	0	0	0	0	0
	31. I could read the screens easily.	0	0	0	0	0
	32. The video was clear.	0	0	0	0	0
	33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	0
	Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	itisfied)	to de	scribe	your	
	35. Notification to attend this training in time to make arrangements.	0	0	0	0	0
	36. Accommodation of my reported special needs.	0	0	0	0	0
	37. Availability of training materials.	0	0	0	0	0
	38. Sufficient training supplies to help me learn.	0	0	0	0	0
	39. Sufficient training equipment to help me learn.	0	0	0	0	0
5	40. Adequacy of the training facility to support learning.	0	0	0	0	0
	41. This training, OVERALL.	0	0	0	0	0
		2.1	0	0	0	a

Thank you for your feedback.

Which parts of the course were least valuable?

1 - Strongly Disagree 2 - Disagree 3 - Neutral 4 - Agree 5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.					
	1	2	3	4	5
24. I was able to control the pace of my learning.	0	0	0	0	6
25. I was able to control the direction of my learning.	0	0	0	0	0
26. The format helped me learn.	0	0	0	0	0
27. The feedback on my actions was helpful.	0	0	0	0	0
28. The computer-based portion of this training was trouble-free.	0	0	0	0	(B)
29. The computer response time was adequate.	0	0	0	0	6
30. The software/courseware was easy to use.	0	0	0	0	•
31. I could read the screens easily.	0	0	0	0	•
32. The video was clear.	0	0	0	0	1
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	3
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	tisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0	0
36. Accommodation of my reported special needs.	0	0	0	0	0
37. Availability of training materials.	0	0	0	0	0
38. Sufficient training supplies to help me learn.	0	0	0	0	0
39. Sufficient training equipment to help me learn.	0	0	0	0	0
40. Adequacy of the training facility to support learning.	0	0	0	0	•
41. This training, OVERALL.	0	0	0	0	0
42. The instructor(s), OVERALL.	0	0	0	0	0
Please use the space below for comments. Note: When referring to instru Which parts of the course were most valuable? Att John + h					

Thank you for your feedback.

Which parts of the course were least valuable?_

1 - Strongly Disagree 2 - Disagree 3 - Neutral 4 - Agree 5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.				- 1	
	1	2	3	4	5
24. I was able to control the pace of my learning.	0	0	0	•	0
25. I was able to control the direction of my learning.	0	0	0	•	0
26. The format helped me learn.	0	0	0	0	0
27. The feedback on my actions was helpful.	0	0	0	•	0
28. The computer-based portion of this training was trouble-free.	0	0	0	0	0
29. The computer response time was adequate.	0	0	0	0	0
30. The software/courseware was easy to use.	0	0	0	0	•
31. I could read the screens easily.	0	0	0	0	•
32. The video was clear.	0	0	0	0	0
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	tisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0	•
36. Accommodation of my reported special needs.	0	0	0	0	0
37. Availability of training materials.	0	0	0	•	0
38. Sufficient training supplies to help me learn.	0	0	0	0	0
 Sufficient training equipment to help me learn. 	0	0	0	0	0
40. Adequacy of the training facility to support learning.	0	0	0	0	0
41. This training, OVERALL.	0	0	0	0	0
42. The instructor(s), OVERALL.	0	0	0	0	0
Please use the space below for comments. Note: When referring to instru	ictors, u	se firs	t nam	e(s) on	ıly.
Which parts of the course were most valuable?					

Thank you for your feedback.

Catalog Number 73159 E

229941-1

1 - Strongly Disagree 2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.				_	
	1	2	3	4	5
24. I was able to control the pace of my learning.	0	0	0	0	(
25. I was able to control the direction of my learning.	0	0	0	0	(
26. The format helped me learn.	0	0	0	0	
27. The feedback on my actions was helpful.	0	0	0	9	(
28. The computer-based portion of this training was trouble-free.	0	0	0	8	(
29. The computer response time was adequate.	0	0	0	0	
30. The software/courseware was easy to use.	0	0	0	0	(
31. I could read the screens easily.	0	0	0	9	(
32. The video was clear.	0	0	0	8	(
33. The audio was clear. (Item 34 is reserved.)	0	0	0	9	(
Assign a rating of "1" through "5" $(1 = \text{Very Dissatisfied} - 5 = \text{Very Salevel of satisfaction with:}$	tisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	(3)	(
36. Accommodation of my reported special needs.	0	0	0	0	
37. Availability of training materials.	0	0	0	0	
38. Sufficient training supplies to help me learn.	0	0	0	0	(
39. Sufficient training equipment to help me learn.	0	0	0	(2)	(
40. Adequacy of the training facility to support learning.	0	0	0	0	(
41. This training, OVERALL.	0	0	0	9	(
42. The instructor(s), OVERALL.	0	0	0	0	6
	ictors, u	se firs	t nam	e(s) on	ıly.
Please use the space below for comments. Note: When referring to instru					

Thank you for your feedback.

Catalog Number 73159 E

229941-1

1 - Strongly Disagree 2 - Disagree 3 - Neutral

4 - Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.	_			1	
	1	2	3	4	5
I was able to control the pace of my learning.	0	0	0	0	C
25. I was able to control the direction of my learning.	0	0	0	0	0
26. The format helped me learn.	0	0	0	0	0
27. The feedback on my actions was helpful.	0	0	0	0	0
28. The computer-based portion of this training was trouble-free.	0	0	0	0	0
29. The computer response time was adequate.	0	0	0	0	0
30. The software/courseware was easy to use.	0	0	0	0	0
31. I could read the screens easily.	0	0	0	0	0
32. The video was clear.	0	0	0	0	0
33. The audio was clear. (Item 34 is reserved.)	0	0	9	0	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	tisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0	0
36. Accommodation of my reported special needs.	0	0	0	0	0
37. Availability of training materials.	0	0	0	0	0
88. Sufficient training supplies to help me learn.	0	0	0	0	0
 Sufficient training equipment to help me learn. 	0	0	0	0	0
 Adequacy of the training facility to support learning. 	0	0	0	0	0
11. This training, OVERALL.	0	0	0	0	0
2. The instructor(s), OVERALL.	0	0	0 0	0	0
Please use the space below for comments. Note: When referring to instru	ictors, u	se firs	t nam	e(s) or	nly.
Which parts of the course were most valuable? HANDSON					-

Thank you for your feedback.

Catalog Number 73159 E

229941-1

1 - Strongly Disagree 2 - Disagree 3 - Neutral 4 - Agree 5 - Strongly Agree

4. I was able to control the pace of my learning. 5. I was able to control the direction of my learning. 6. The format helped me learn.	0 0	0	3	4	5
5. I was able to control the direction of my learning.6. The format helped me learn.	0	0	0	0	0
6. The format helped me learn.		0	(3.7%)		
son statutus augusta erekataban suotata erinna autot 190	200	1000	0	0	0
7 771 6 11 1	10	0	0	0	0
The feedback on my actions was helpful.	0	0	0	0	0
8. The computer-based portion of this training was trouble-free.	0	0	0	0	0
9. The computer response time was adequate.	0	0	0	0	3
0. The software/courseware was easy to use.	0	0	0	0	0
I could read the screens easily.	0	0	0	0	0
2. The video was clear.	0	0	0	0	@
3. The audio was clear. (tem 34 is reserved.)	0	0	0	0	0
assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Saevel of satisfaction with:	atisfied)	to de	scribe	your	
5. Notification to attend this training in time to make arrangements.	0	0	0	0	0
Accommodation of my reported special needs.	0	0	0	0	(2)
7. Availability of training materials.	0	0	0	0	(3)
Sufficient training supplies to help me learn.	0	0	0	0	0
Sufficient training equipment to help me learn.	0	0	0	0	0
Adequacy of the training facility to support learning.	0	0	0	0	0
. This training, OVERALL.	. 0	0	0 0	0	0
2. The instructor(s), OVERALL.	0	0	0	0	0

Thank you for your feedback.

Which parts of the course were least valuable?_

1 - Strongly Disagree 2 - Disagree

3 - Neutral

4-Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types.		- 202		_	-
	1	2	3	4	5
 I was able to control the pace of my learning. 	0	0	0	0	6
25. I was able to control the direction of my learning.	0	0	0	0	6
26. The format helped me learn.	0	0	0	0	6
27. The feedback on my actions was helpful.	0	0	0	0	0
28. The computer-based portion of this training was trouble-free.	0	0	0	0	6
29. The computer response time was adequate.	0	0	0	0	•
30. The software/courseware was easy to use.	0	0	0	0	0
31. I could read the screens easily.	0	0	0	0	6
32. The video was clear.	0	0	0	0	Ó
33. The audio was clear. (Item 34 is reserved.)	0	0	0	0	Ó
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very S level of satisfaction with:	atisfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0	0
36. Accommodation of my reported special needs.	0	0	0	0	0
37. Availability of training materials.	0	0	0	0	0
38. Sufficient training supplies to help me learn.	0	0	0	0	0
 Sufficient training equipment to help me learn. 	0	0	0	0	0
40. Adequacy of the training facility to support learning.	0	0	0	0	G
41. This training, OVERALL.	0	0	0	0	Ø
42. The instructor(s), OVERALL.	0	0	0	0	9
	uctors, u	se firs	st nam	e(s) or	ıly.
Please use the space below for comments. Note: When referring to instr					

Thank you for your feedback.

Catalog Number 73159 E