evaluation is anonymous and should be completed on official time. Participation Your feedback provides important information to improve this course. This s 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

16930

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.	O Day	O Afternoon	Night					
2.	Identify your status.	@ Permanent	O Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	ledge and skills ne	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 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	0	0	6
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	0	0
11.	I received this trainin	g 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 I	was taught.		0	0	0	@	0
	The instructor(s) wer		overse, con V ene		0	0	0	0	0
	The instructor(s) wer		lividual help.		0	0	0	0	0
	The instructor(s)' res		-4-07-41		0	0	0	0	0
	The instructor(s)' pre	A SA			0	0	0	0	@

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

Integrated Training Evaluation and Measurement Services (ITEMS)

LASSROOM 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 380410

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.

Not Applicable

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

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	O 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
4.	The course objective	s focused on my j	ob tasks.		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 unde	erstand.		0	0	0	0	•
8.	The learning activitie	s encouraged my	participation.		0	0	0	0	0
9.	I practiced what I was	s taught.			0	0	0	0	
10.	The course length was	s sufficient to del	iver the content.		0	0	0	0	0
11.	I received this training	g when I needed i	t.		0	0	0	0	
12.	The job aid materials	seem useful.			0	0	0	0	•
13.	The test(s) were consi	istent with what I	was taught.		0	0	0	0	0
	The instructor(s) were		nise seome t icani		0	0	0	0	0
	The instructor(s) were		ividual help.		0	0	0	0	•
	The instructor(s)' resp				0	0	0	0	0
	The instructor(s)' pres				0	0	0	0	•

evaluation is anonymous and should be completed on official time. Participation four 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 380410

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	O Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	edge and skills n	ecessary to begin	this training.	0	0	0	•	0
4.	The course objective	s focused on my	job tasks.		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
7.	The course materials	were easy to und	erstand.		0	0	•	0	0
8.	The learning activitie	s encouraged my	participation.		0	0	0		0
9.	I practiced what I was	s taught.			0	0	•	0	0
10.	The course length wa	s sufficient to del	liver the content.		0	0	•	0	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	istent with what I	was taught.		0	0	•	0	0
14.	The instructor(s) were	e prepared.			0	0	0	•	0
15.	The instructor(s) were	e available for inc	lividual help.		0	0	0		0
16.	The instructor(s)' resp	ponses helped me	learn.		0	0	0	9	0
17.	The instructor(s)' pre	sentations helped	me learn.		0	0	0	•	0

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)

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

Scale and Rating Definitions:

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

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.	O Night					
2.	. Identify your status.	○ Term	1	2	3	4	5
3.	. I had the basic knowledge and skills necessary to begin	n 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	69
7.	. The course materials were easy to understand.		0	0	0	0	٥
8.	. The learning activities encouraged my participation.		0	0	0	0	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	6
11.	. I received this training when I needed it.	25	0	0	0	0	9
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	9
14.	. The instructor(s) were prepared.		0	0	0	0	9
15.	. The instructor(s) were available for individual help.		0	0	0	0	
	. The instructor(s)' responses helped me learn.		0	0	0	0	
	The instructor(s)' presentations helped me learn.		0	0	0	0	*

evaluation is anonymous and should be completed on official time. Participation four 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

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.	D ay	O Afternoon	O Night					
. 2.	Identify your status.	Permanent	O Seasonal	○ Term	1	2	3	4	-5
3.	I had the basic knowl	ledge and skills no	ecessary to begin	this training.	0	0	6	0	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	0
6.	The course materials	helped me learn.			0	O	0	•	0
7.	The course materials	were easy to und	erstand.		0	0		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	8	0	0
10.	The course length wa	s sufficient to del	iver the content.		0	0	0	0	0
11.	I received this training	g when I needed i	it.		0	0	0	0	0
12.	The job aid materials	seem useful.			0	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) were	e prepared.			0	0	0	0	®
15.	The instructor(s) were	e available for ind	lividual help.		0	0	0	0	0
16.	The instructor(s)' resp	ponses helped me	learn.		0	0	0	0	0
17.	The instructor(s)' pres	sentations helped	me learn.		0	0	0	0	0

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

Integrated Training Evaluation and Measurement Services (ITEMS)

_ASSROOM 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

380410

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	O 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
4.	The course objective	es focused on my j	job tasks.		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	
7.	The course materials	were easy to und	erstand.		0	0	0	0	•
8.	The learning activitie	s encouraged my	participation.		0	0	0	0	
9.	I practiced what I was	s taught.			0	0	0	0	6
10.	The course length wa	s sufficient to del	iver the content.		0	0	0	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	istent with what I	was taught.		0	0	0	0	
14.	The instructor(s) were	e prepared.	-		0	0	0	0	•
	The instructor(s) were	17 17 10 10 10 10 10 10 10 10 10 10 10 10 10 1	lividual help.		0	0	0	0	
	The instructor(s)' resp		- T-		0	0	0	0	4
	The instructor(s)' pres				0	0	0	0	

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

Integrated Training Evaluation and Measurement Services (ITEMS)

LASSROOM 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 380410

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. Ide	entify your shift.	○ Day	O Afternoon	Night					
2. Ide	entify your status.	Permanent	O Seasonal	○ Term	1	2	3	4	5
3. I h	ad the basic knowl	edge and skills no	ecessary to begin	his training.	0	0	0		0
4. Th	ne course objective	s focused on my j	ob tasks.		0	0	0	0	0
5. Th	e course content m	atched the object	ives.		0	0	0		0
6. Th	e course materials	helped me learn.			0	0	0	•	0
7. Th	e course materials	were easy to unde	erstand.		0	0	0	0	
8. Th	e learning activitie	s encouraged my	participation.		0	0	0		0
9. I p	racticed what I was	s taught.			0	0	0	0	9
10. Th	e course length wa	s sufficient to del	iver the content.		0	0	0	•	0
11. I re	eceived this training	g when I needed i	t.		0	0		0	0
12. Th	e job aid materials	seem useful.			0	0	0	•	0
13. Th	e test(s) were consi	istent with what I	was taught.		0	0	0	•	0
14. Th	e instructor(s) were	e prepared.			0	0	0	0	
15. Th	e instructor(s) were	e available for ind	ividual help.		0	0	0	0	0
16. The	e instructor(s)' resp	oonses helped me	learn.		0	0	0	0	•
17. The	e instructor(s)' pres	sentations helped	me learn.		0	0	0	0	•

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

Integrated Training Evaluation and Measurement Services (ITEMS)

.ASSROOM 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 1693

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.	O Day	O Afternoon	O Night					
2.	Identify your status.	© Permanent	O 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 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	0	®
9.	I practiced what I wa	s taught.			0	0	0	0	0
10.	The course length wa	as sufficient to del	liver the content.		0	0	0	6	0
11.	I received this trainin	g when I needed	it.		0	0	0	0	400
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	G
14.	The instructor(s) wer	e prepared.			0	0	0	0	•
15.	The instructor(s) wer	e available for inc	lividual help.		0	0	0	0	4
16.	The instructor(s)' res	ponses helped me	learn.		0	0	0	0	1
17.	The instructor(s)' pre	sentations helped	me learn.		0	0	0	0	0

evaluation is anonymous and should be completed on official time. Participation four feedback provides important information to improve this course. This is voluntary but strongly encouraged. Thank you. Integrated Training Evaluation and Measurement Services (ITEMS)

.ASSROOM 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

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	O 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
4.	The course objective	s focused on my	job tasks.		0	0	•	0	0
5.	The course content m	natched the object	ives.		0	0	0	8	0
6.	The course materials	helped me learn.			0	0	0	(3)	0
7.	The course materials	were easy to und	erstand.		0	0	0	1	0
8.	The learning activitie	s encouraged my	participation.		0	0	0	0	©
9.	I practiced what I was	s taught.			0	0	0	0	0
10.	The course length wa	s sufficient to del	iver the content.		0	0	0	(a)	0
11.	I received this trainin	g when I needed i	it.		0	0	0	®	0
12.	The job aid materials	seem useful.			0	0	0	a	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	0
15.	The instructor(s) were	e available for ind	lividual help.		0	0	0	0	3
16.	The instructor(s)' resp	ponses helped me	learn.		0	0	0	@	0
17.	The instructor(s)' pre-	sentations helped	me learn.		0	0	0	@	0

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)

LASSROOM 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

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	2	3	4	5
0	0	0	0	•
0	0	0	.0	9
0	0	0	•	0
0	0	0	0	•
0	0	0	0	0
0	0	0	0	0
0	0	0	0	9
0	0	0	0	0
0	0	•	0	0
0	0	0	0	0
0	0	0	0	0
0	0	0	0	9
0	0	0	0	6
0	0	0	0	9
0	0	0	0	0
	0 0 0 0	0 0 0 0 0 0 0		

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)

ASSROOM 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

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	O Seasonal	○ Term	1	2	3	4	5
3. I had the basic know	vledge and skills n	ecessary to begin	this training.	0	0	0	0	0
4. The course objectiv	es focused on my	job tasks.		0	0	0	•	0
5. The course content i	matched the object	ives.		0	0	0	@	0
6. The course materials	s helped me learn.			0	0	0	0	0
7. The course materials	s were easy to und	erstand.		0	0	0	0	0
8. The learning activiti	es encouraged my	participation.		0	0	0	0	0
9. I practiced what I wa	as taught.			0	0	0	9	0
10. The course length w	as sufficient to del	iver 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	٨	0
15. The instructor(s) we	re available for ind	lividual help.		0	0	0	0	0
16. The instructor(s)' res	sponses helped me	learn.		0	0	0	0	0
17. The instructor(s)' pro	esentations helped	me learn.		0	0	0	0	0

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)

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.

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.	Night				
2.	. Identify your status. Permanent O Seasonal O	Term 1	2	3	4	5
3.	. I had the basic knowledge and skills necessary to begin this tr	aining.	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
8.	. The learning activities encouraged my participation.	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	0
11.	. I received this training when I needed it.	0	0	6	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	
14.	. The instructor(s) were prepared.	0	0	0	4	0
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	0
17.	The instructor(s)' presentations helped me learn.	0	0	0	0	0

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)

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.

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					4
2	. Identify your status.	Permanent	O 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	
4	The course objective	es focused on my	job 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	•
7.	The course materials	were easy to und	erstand.		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 del	iver the content.		0	0	0	0	0
11.	I received this training	ig when I needed i	it.		0	0	0	Ó	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	0
14.	The instructor(s) wer	e prepared.			0	0	0	0	0
15.	The instructor(s) were	e available for ind	ividual help.		0	0	0	0	0
16.	The instructor(s)' resp	ponses helped me	learn.		0	0	0	0	0
17.	The instructor(s)' pre	sentations helped	me learn.		0	0	0	0	0

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)

SSROOM

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

380410

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.	O Day	O Afternoon	Night					
2. Identify your status.	Permanent	O 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
4. The course objective	s focused on my j	ob tasks.		0	0	0	0	•
5. The course content m	atched the object	ives.		0	0	0	0	•
6. The course materials	helped me learn.			0	0	0	0	•
7. The course materials	were easy to unde	erstand.		0	0	0	0	0
8. The learning activitie	s encouraged my	participation.		0	0	0	•	0
9. I practiced what I was	s taught.			0	0	0	0	•
10. The course length wa	s sufficient to del	iver the content.		0	0	•	0	0
11. I received this training	g when I needed i	t.		0	0	0	•	0
12. The job aid materials	seem useful.			0	0	0	0	
13. The test(s) were consi	istent with what I	was taught.		0	0	0	0	•
14. The instructor(s) were	e prepared.			0	0	0	0	•
15. The instructor(s) were	e available for ind	ividual help.		0	0	0	0	•
16. The instructor(s)' resp	oonses helped me	learn.		0	0	0	•	0
17. The instructor(s)' pres	sentations helped	me learn.		0	0	0	0	0

1 - Strongly Disagree 2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types. 3 5 24. I was able to control the pace of my learning. 25. I was able to control the direction of my learning. The format helped me learn. 27. The feedback on my actions was helpful. The computer-based portion of this training was trouble-free. The computer response time was adequate. The software/courseware was easy to use. 31. I could read the screens easily. 32. The video was clear. 33. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to describe your 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. Sufficient training supplies to help me learn. 39. Sufficient training equipment to help me learn. 40. Adequacy of the training facility to support learning. 41. This training, OVERALL. The instructor(s), OVERALL. Please use the space below for comments. Note: When referring to instructors, use first name(s) only. Which parts of the course were most valuable?

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.	Use				
	1	2	3	4	5
24. I was able to control the pace of my learning.	0	0	0	3	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	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	0	0	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very S level of satisfaction with:	satisfied)	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	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
0 1 P		0	0	0	0
40. Adequacy of the training facility to support learning.			0	0	0
PERMIT A AND AND AND AND AND AND AND AND AND A	0	0	O	\sim	
40. Adequacy of the training facility to support learning.	0	0	0	0	0
40. Adequacy of the training facility to support learning.41. This training, OVERALL.	_	nontrion.			

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
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
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	•	0
32. The video was clear.	0	0	0	•	0
33. The audio was clear.	0	0	•	0	0
(Item 34 is reserved.)					
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	•
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	0	•
40. Adequacy of the training facility to support learning.	0	0	0	0	•
41. This training, OVERALL.	0	0	0	0	•
VANEAU I MAY CIRROPO DA PROPERTO PROCESSOR AL SERVICIO DE MARIE I	0	0	0	0	
42. The instructor(s), OVERALL,					

Which parts of the course were least valuable?

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

	item numbers 16 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	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	Ø	0
To a	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	Ø
	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.	0	0	0	0	0
	(Item 34 is reserved.)					
	Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Salevel of satisfaction with:	atisfied)	to de	scribe	your	Ç.
	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	8	0
	41. This training, OVERALL.	0	0	0	0	0
	42. The instructor(s), OVERALL.	0	0	0	6	0
	Please use the space below for comments. Note: When referring to instr	uctors, t	ise fir	st nam	e(s) or	nly.

Which parts of the course were least valuable?_____

Which parts of the course were most valuable? __

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

Item numbers 18 to 23 are reserved for other class types.		S. C. C. Prince			
	1	2	3	4	5
24. I was able to control the pace of my learning.	0	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	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	0	0	0
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	6
36. Accommodation of my reported special needs.	0	0	0	0	9
37. Availability of training materials.	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	©
40. Adequacy of the training facility to support learning.	0	0	0	0	9
41. This training, OVERALL.	0	0	0	0	@
42. The instructor(s), OVERALL.	0	0	0	0	
Please use the space below for comments. Note: When referring to instr		5.95	310	CONTRACT N	10 m
Which parts of the course were most valuable?					

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. 3 5 24. I was able to control the pace of my learning. 25. I was able to control the direction of my learning. 0 26. The format helped me learn. The feedback on my actions was helpful. 28. The computer-based portion of this training was trouble-free. The computer response time was adequate. 30. The software/courseware was easy to use. I could read the screens easily. The video was clear. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to describe your level of satisfaction with: Notification to attend this training in time to make arrangements. 36. Accommodation of my reported special needs. 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. 41. This training, OVERALL. 42. The instructor(s), OVERALL. Please use the space below for comments. Note: When referring to instructors, use first name(s) only.

Thank you for your feedback.

Which parts of the course were most valuable? _____

Which parts of the course were least valuable?_____

Form 12464 (10-1999)

1 - Strongly Disagree 2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types. 3 I was able to control the pace of my learning. 25. I was able to control the direction of my learning. The format helped me learn. 0 The feedback on my actions was helpful. 28. The computer-based portion of this training was trouble-free. 0 29. The computer response time was adequate. 30. The software/courseware was easy to use. 31. I could read the screens easily. 32. The video was clear. 33. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to describe your level of satisfaction with: Notification to attend this training in time to make arrangements. Accommodation of my reported special needs. Availability of training materials. 38. Sufficient training supplies to help me learn. Sufficient training equipment to help me learn. Adequacy of the training facility to support learning. 41. This training, OVERALL. The instructor(s), OVERALL. Please use the space below for comments. Note: When referring to instructors, use first name(s) only. Which parts of the course were most valuable? ____

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	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	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	0	0	0
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	•
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	0	•
40. Adequacy of the training facility to support learning.	0	0	0	0	0
41. This training, OVERALL.	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?					ıly.

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	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
66	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.	0	0	0	0	0
	(Item 34 is reserved.)					
	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	•
179	37. Availability of training materials.	0	0	0	0	
	38. Sufficient training supplies to help me learn.	Ó	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	٠
	41. This training, OVERALL.	0	0	0	0	•
	42. The instructor(s), OVERALL.	0	0	0	0	
	Please use the space below for comments. Note: When referring to instru	actors, t	ise fir	st nam	e(s) or	ıly.

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	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	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	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
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
39. Sufficient training equipment to help me learn.	0	0	1	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 Which parts of the course were most valuable?	***************************************				ıly.

Which parts of the course were least valuable?_

1 - Strongly Disagree 2 - Disagree

3 - Neutral 4 - Agree

5 - Strongly Agree

 I was able to control the pace of my learning. I was able to control the direction of my learning. The format helped me learn. The feedback on my actions was helpful. The computer-based portion of this training was trouble-free. The computer response time was adequate. The software/courseware was easy to use. I could read the screens easily. The video was clear. The audio was clear. Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel of satisfaction with: Notification to attend this training in time to make arrangements. Accommodation of my reported special needs. Availability of training materials. Sufficient training supplies to help me learn. Adequacy of the training facility to support learning. 	0 0 0 0	0 0	0	0	_
 The format helped me learn. The feedback on my actions was helpful. The computer-based portion of this training was trouble-free. The computer response time was adequate. The software/courseware was easy to use. I could read the screens easily. The video was clear. The audio was clear. a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel of satisfaction with: Notification to attend this training in time to make arrangements. Accommodation of my reported special needs. Availability of training materials. Sufficient training supplies to help me learn. Sufficient training equipment to help me learn. 		0	0		0
 The feedback on my actions was helpful. The computer-based portion of this training was trouble-free. The computer response time was adequate. The software/courseware was easy to use. I could read the screens easily. The video was clear. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel of satisfaction with: Notification to attend this training in time to make arrangements. Accommodation of my reported special needs. Availability of training materials. Sufficient training supplies to help me learn. Sufficient training equipment to help me learn. 		0	_	0	0
 The computer-based portion of this training was trouble-free. The computer response time was adequate. The software/courseware was easy to use. I could read the screens easily. The video was clear. The audio was clear. a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel of satisfaction with: Notification to attend this training in time to make arrangements. Accommodation of my reported special needs. Availability of training materials. Sufficient training supplies to help me learn. Sufficient training equipment to help me learn. 	0	0	0	0	0
 29. The computer response time was adequate. 30. The software/courseware was easy to use. 31. I could read the screens easily. 32. The video was clear. 33. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel 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. 	1.00000	0	0	0	0
 The software/courseware was easy to use. I could read the screens easily. The video was clear. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Sat level of satisfaction with: Notification to attend this training in time to make arrangements. Accommodation of my reported special needs. Availability of training materials. Sufficient training supplies to help me learn. Sufficient training equipment to help me learn. 	0	0	0	0	0
 I could read the screens easily. The video was clear. I the audio was clear. Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel of satisfaction with: Notification to attend this training in time to make arrangements. Accommodation of my reported special needs. Availability of training materials. Sufficient training supplies to help me learn. Sufficient training equipment to help me learn. 	0	0	0	0	0
 32. The video was clear. 33. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel 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. 	0	0	0	0	0
 33. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel 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. 	0	0	0	0	0
(Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied–5 = Very Sat 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.	0	0	0	0	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied–5 = Very Sat 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.	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.					
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.	isfied)) to de	escrib	e your	
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
38. Sufficient training supplies to help me learn.39. Sufficient training equipment to help me learn.	0	0	0	0	0
39. Sufficient training equipment to help me learn.	0	0	0	0	•
	0	0	0	0	0
40. Adequacy of the training facility to support learning.	0	0	0	0	9
and a second manage and a	0	0	0	0	®
41. This training, OVERALL.	0	0	0	0	0
42. The instructor(s), OVERALL.	0	0	0	0	(8)
Addition of the Addition of th	_				

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.

I was able to control the pace of my learning. 25. I was able to control the direction of my learning. 26. The format helped me learn. 27. The feedback on my actions was helpful. 28. The computer-based portion of this training was trouble-free. 29. The computer response time was adequate. 30. The software/courseware was easy to use. 31. I could read the screens easily. 32. The video was clear. 33. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to describe your 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. Sufficient training equipment to help me learn. Adequacy of the training facility to support learning. 41. This training, OVERALL. 42. The instructor(s), OVERALL. Please use the space below for comments. Note: When referring to instr Which parts of the course were most valuable?

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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

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Thank you for your feedback.

Which parts of the course were least valuable? At was

1 - Strongly Disagree 2 - Disagree

3 - Neutral

4 - Agree

5 - Strongly Agree

Item numbers 18 to 23 are reserved for other class types. 24. I was able to control the pace of my learning. 25. I was able to control the direction of my learning. 26. The format helped me learn. 27. The feedback on my actions was helpful. 28. The computer-based portion of this training was trouble-free. The computer response time was adequate. 30. The software/courseware was easy to use. I could read the screens easily. 32. The video was clear. The audio was clear. (Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to describe your level of satisfaction with: Notification to attend this training in time to make arrangements. 36. Accommodation of my reported special needs. 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. 41. This training, OVERALL. The instructor(s), OVERALL. Please use the space below for comments. Note: When referring to instructors, use first name(s) only. Which parts of the course were most valuable? ___

Which parts of the course were least valuable? Not gusting the class Stoken.