Solaris Systan Admin 7/31-814

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	3(5216

### Scale and Rating Definitions:

Strongly Disagree

I 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	○ Afternoon	O Night					
2.	Identify your status.	O Permanent	○ Seasonal	○ Term	1	2	3	4	 5
3.	I had the basic knowl	edge and skills ne	cessary to begin t	his training.	0	0	0	0	<b>3</b>
4.	4. The course objectives focused on my job tasks.					0	0	0	<b>3</b>
5.	The course content m	atched the objecti	ives.		0	0	0	0	3
6.	The course materials	helped me learn.			0	0	0	0	9
7.	The course materials	were easy to unde	erstand.		0	0	0	0	<b>@</b>
8.	The learning activitie	s encouraged my	participation.		0	0	0	0	0
9.	9. I practiced what I was taught.			0	0	0	0	@	
10.	The course length wa	s sufficient to del	iver the content.		0	0	0	0	Q
11.	I received this training	g when I needed i	t.		0	,0	0	0	4
12.	The job aid materials	seem useful.			0	0	0	0	9
13.	The test(s) were const	istent with what I	was taught.		0	0	0	0	<b>(3)</b>
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	<b>3</b>
17.	The instructor(s)' pres	sentations helped	me learn.	ļ		0	0	0	9

Please do not attempt to copy this form. Duplicated forms cannot be scanned. 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.					
	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	<b>О</b> .	0	0	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satilevel of satisfaction with:	sfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0	0	0.	<b>3</b>
36. Accommodation of my reported special needs.	0	0	0	0	<b>3</b>
37. Availability of training materials.	0	0	0	0	<b>@</b>
38. Sufficient training supplies to help me learn.	0	0	0	0	<b>3</b>
39. Sufficient training equipment to help me learn.	0	0	0	$\circ$	8
40. Adequacy of the training facility to support learning.	0	0	0	0	160
41. This training, OVERALL.	0	0	0	0	<b>@</b>
42. The instructor(s), OVERALL.	$\circ$	0	0	0	0
Please use the space below for comments. Note: When referring to instruc	tors, u	se firs	t nam	e(s) or	 ıly.
Which parts of the course were most valuable?					_
Which parts of the course were least valuable?					

## **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.

•	265741
ACES Class Number	365 246
MOED CIASS MULLING	

### **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.	<b>②</b> Day	Afternoon	○ Night					
2.	Identify your status.	Permanent	O Seasonal	○ Term	1	2	3:	4	5
3.	I had the basic knowl	edge and skills ne	cessary to begin t	his training.	0	0	g.	<b>3</b>	0
4.	4. The course objectives focused on my job tasks.				0	0		0	0
5.	5. The course content matched the objectives.				0	0	0	<b>②</b>	0
6.	The course materials	helped me learn.			0	0	0	<b>②</b>	0
7.	The course materials	were easy to unde	erstand.		0	$\circ$	0	<b>3</b>	0
8.	The learning activitie	s encouraged my	participation.		0	0	0	<b>@</b>	0
9.	9. I practiced what I was taught.			0	0	0	<b>3</b>	0	
10.	The course length wa	s sufficient to del	iver the content.		0	0	0	<b>(3)</b>	0
11.	I received this training	g when I needed i	t.		0	0	0	<b>3</b>	0
12.	The job aid materials	seem useful.			0	0	0	<b>③</b>	0
13.	The test(s) were consi	istent with what I	was taught.		0	0	0	<b>③</b>	0
14.	The instructor(s) were	e prepared.			0	$\circ$	0	<b>③</b>	0
15.	The instructor(s) were	e available for ind	ividual help.		0	0	0	0	٨
16.	The instructor(s)' resp	oonses helped me	learn.		0	0	0	0	<b>③</b>
17.	The instructor(s)' pres	sentations helped	me learn.		0	0	0	0	<b>3</b>

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

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	
24. I was able to control the pace of my learning.	$ \circ $	0	•	0	
25. I was able to control the direction of my learning.	0	0	3	0	
26. The format helped me learn.	0	0	$\circ$	<b>3</b>	
27. The feedback on my actions was helpful.	0	0	0	<b>②</b>	
28. The computer-based portion of this training was trouble-free.	0	0	<b>3</b>	0	
29. The computer response time was adequate.	0	0	0	<b>3</b>	
30. The software/courseware was easy to use.	0	0	0	<b>②</b>	
31. I could read the screens easily.	0	0	0	<b>3</b>	
32. The video was clear.		0	<b>②</b>	0	
33. The audio was clear.	0	0	<b>(2)</b>	0	
(Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel of satisfaction with:	 isfied) 	to de	scribe	your	,
35. Notification to attend this training in time to make arrangements.	0	0	$\circ$		
36. Accommodation of my reported special needs.	0	0	3	0	
37. Availability of training materials.	0	0	0	<b>②</b>	
38. Sufficient training supplies to help me learn.	0	0	0	<b>③</b>	
39. Sufficient training equipment to help me learn.	0	0	$\circ$	<b>③</b>	
	0	0	٨	0	
40. Adequacy of the training facility to support learning.		0	0	<b>②</b>	
40. Adequacy of the training facility to support learning. 41. This training, OVERALL.					
	0	0	0	$\circ$	
41. This training, OVERALL.	etors, u	 use firs	o st nam	e(s) 01	- ıl

## **ASSROOM**

Standardized Level 1 - Trainee's Course Evaluation

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

	range of the state
	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.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowle	edge and skills ne	ecessary to begin t	his training.	0	<b>②</b>	0	0	0
4.	4. The course objectives focused on my job tasks.			0	0		0	0	
5.	The course content m	atched the object	ives.		0	0	<b>Ø</b>	0	0
6.	The course materials	helped me learn.			0	0	<b>@</b>	0	0
7.	The course materials	were easy to unde	erstand.		0	0	<b>©</b>	0	0
8.	The learning activities	s encouraged my	participation.		0	0	0	<b>@</b>	0
9.	9. I practiced what I was taught.			0	0	0	<b>@</b>	0	
10.	The course length was	s sufficient to del	iver the content.		0	<b>②</b>	0	0	0
11.	I received this training	g when I needed i	t.		0	$\circ$	<b>@</b>	0	0
12.	The job aid materials	seem useful.			0	0	0	<b>@</b>	0
13.	The test(s) were consi	istent with what I	was taught.		0	0	<b>Ø</b>	0	0
14.	The instructor(s) were	e prepared.			0	0	0	0	٠
15.	The instructor(s) were	e available for ind	ividual help.		0	0	0	0	<b>@</b>
16.	The instructor(s)' resp	oonses helped me	learn.		0	0	0	0	<b>Ø</b>
17.	The instructor(s)' pres	sentations helped	me learn.		0	0	0	0	<b>②</b>

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. Participat Your feedback provides important information to improve this course. This s voluntary but strongly encouraged. Thank you.

value one Paragrafi

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

	Item numbers 18 to 23 are reserved for other class types.	<del>_</del>				
		1	2	3	4	5
	24. I was able to control the pace of my learning.	0	<b>②</b>	0	0	0
	25. I was able to control the direction of my learning.	0	<b>1</b>	0	0	0
	26. The format helped me learn.	0	0	Ø	0	0
	27. The feedback on my actions was helpful.	0	0	<b>@</b>	0	0
	28. The computer-based portion of this training was trouble-free.	<b>3</b>	0	0	0	0
	29. The computer response time was adequate.	0	<b>@</b>	0	0	0
	30. The software/courseware was easy to use.	0	$\odot$	Ø	0	0
	31. I could read the screens easily.	0	0	0	0	0
	32. The video was clear.	0	0	0	0	8
ng Lord ng Lord 1073	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 Satilevel of satisfaction with:	sfied)	to de	scribe	your	
	35. Notification to attend this training in time to make arrangements.	0	0		0	<b>②</b>
	36. Accommodation of my reported special needs.	0	0	<b>3</b>	0	0
	37. Availability of training materials.	0	0	0	0	Ø
	38. Sufficient training supplies to help me learn.	0	0	0	0	Ø
	39. Sufficient training equipment to help me learn.		$\circ$	0	0	0
	40. Adequacy of the training facility to support learning.	0	0	<b>Ø</b>	0	0
	41. This training, OVERALL.	0	0	<b>a</b>	0	0
	42. The instructor(s), OVERALL.		0	0	0	Ø
	Please use the space below for comments. Note: When referring to instruc	tors, u	ıse firs	st nam	e(s) or	ıly.
	Which parts of the course were most valuable? HAVDS DN -	<u> 10</u>	<u>51</u>	<u>vct</u>	78€	
A Parket of the Control of the Contr	Givent - Devsoruble - helpful -					
	Which parts of the course were least valuable? 100 HOT 1N	R	<u>0</u> 0	M.	9	
	Computer Swere not all Set up					

is voluntary but strongly encouraged. Thank you

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

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 EMS 365Z46

### **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 Afternoon	O Night					
2. Identify your status. Permanent O Seasonal	○ Term	1	2	3	4	5
3. I had the basic knowledge and skills necessary to begin the	nis 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	9	0
7. The course materials were easy to understand.		0	0	0	<b>②</b>	0
8. The learning activities encouraged my participation.		0	0	<b>②</b>	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	<b>()</b>	0
11. I received this training when I needed it.		0	0	0	<b>②</b>	0
12. The job aid materials seem useful.		0	0	0	<b>(3</b> )	0
13. The test(s) were consistent with what I was taught.		0	0	0	<b>③</b>	0
14. The instructor(s) were prepared.		0	0	0	•	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	<b>③</b>	0
17. The instructor(s)' presentations helped me learn.		0	0	0	<b>3</b>	0

Please do not attempt to copy this form. Duplicated forms cannot be scanned. Thank you for your feedback.

## **Standardized Level 1 - Trainee's**

3 - Neutral

1 - Strongly Disagree 2 - Disagree

**Course Evaluation** 

4 - Agree

5 - Strongly Agree

	1	2	3	4	5
24. I was able to control the pace of my learning.		0	3	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	<b>(1)</b>	0
27. The feedback on my actions was helpful.	0	0		0	$\circ$
28. The computer-based portion of this training was trouble-free.		0	0	<b></b>	0
29. The computer response time was adequate.	0	0	0		0
30. The software/courseware was easy to use.	0	0	0	(3)	0
31. I could read the screens easily.	0	0	0	<b>(3)</b>	0
32. The video was clear.	0	0	3	0	0
33. The audio was clear.	0	0	0	<b>3</b>	0
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Sat level of satisfaction with:	isfied)	to de	scribe	your	•
35. Notification to attend this training in time to make arrangements.	0	0	0	2	0
36. Accommodation of my reported special needs.	0	0	Õ	0	0
37. Availability of training materials.	0	0	0	<b>②</b>	0
38. Sufficient training supplies to help me learn.	0	0	0	<b>②</b>	0
39. Sufficient training equipment to help me learn.		0	0	<b>@</b>	$\circ$
40. Adequacy of the training facility to support learning.	0	0	0	<b>()</b>	0
41. This training, OVERALL.	0	0	0	<b>3</b>	0
42. The instructor(s), OVERALL.		0	0	<b>3</b>	0
Please use the space below for comments. Note: When referring to instru	ctors. 1	ıse fir	t nam	e(s) 01	nly.
	,			` '	- <b>J</b> -
	<ul> <li>25. I was able to control the direction of my learning.</li> <li>26. The format helped me learn.</li> <li>27. The feedback on my actions was helpful.</li> <li>28. The computer-based portion of this training was trouble-free.</li> <li>29. The computer response time was adequate.</li> <li>30. The software/courseware was easy to use.</li> <li>31. I could read the screens easily.</li> <li>32. The video was clear.</li> <li>(Item 34 is reserved.)</li> <li>Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satlevel of satisfaction with:</li> <li>35. Notification to attend this training in time to make arrangements.</li> <li>36. Accommodation of my reported special needs.</li> <li>37. Availability of training materials.</li> <li>38. Sufficient training supplies to help me learn.</li> <li>39. Sufficient training equipment to help me learn.</li> <li>40. Adequacy of the training facility to support learning.</li> <li>41. This training, OVERALL.</li> <li>42. The instructor(s), OVERALL.</li> <li>Please use the space below for comments, Note: When referring to instruction in the company of the straining to instruction.</li> </ul>	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.  (Item 34 is reserved.)  Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) 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.  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, to the state of the state	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.  (Item 34 is reserved.)  Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to delevel 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.  40. Adequacy of the training facility to support learning.  41. This training, OVERALL.  Please use the space below for comments, Note: When referring to instructors, use fire	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.  (Item 34 is reserved.)  Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to describe 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.  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	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.  (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.  40. Adequacy of the training facility to support learning.

Thank you for your feedback.

Which parts of the course were least valuable?\_

# evaluation is anonymous and should be completed on official time. Participat 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** 

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 Heavily darken the "bubble" that corresponds with ye				m.			
1. Identify your shift.  Day							
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	•		
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		
11. I received this training when I needed it.	0	0	0	0	•		
12. The job aid materials seem useful.		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	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	•		

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

Thank you for your feedback.

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

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

Item numbers 18 to 23 are reserved for other class types.				i
	1	2	3	4
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
29. The computer response time was adequate.		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
32. The video was clear.		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 Sallevel of satisfaction with:	 tisfied)	to de	scribe	e you
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
38. Sufficient training supplies to help me learn.	0	0	0	0
	0	0	0	0
39. Sufficient training equipment to help me learn.	1	0	0	0
<ul><li>39. Sufficient training equipment to help me learn.</li><li>40. Adequacy of the training facility to support learning.</li></ul>		_		0
	0	0	0	_
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.	ctors, 1	O O Isé fir	O St nam	e(s)

Thank you for your feedback.

Catalog Number 73159 E

229941-1

Department of the Treasury-Internal Revenue Service

# 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 ELMS 365246

### **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 Not Applicable 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	○ Seasonal	○ Term	1	2	3	4	5
3. I had the basic know	vledge and skills n	ecessary to begin t	his training.	0	0	0	0	0
4. The course objective	ves focused on my	job tasks.		0	0	0	0	0
5. The course content	5. The course content matched the objectives.					0	0	<b>@</b>
6. The course materials helped me learn.					0	0	0	<b>D</b>
7. The course materials were easy to understand.				0	0	0	•	0
8. The learning activities encouraged my participation.					0	0	0	<b>3</b>
9. I practiced what I was taught.				0	0	0	0	<b>3</b>
10. The course length w	vas sufficient to del	liver the content.		0	0	0	0	<b>3</b>
11. I received this traini	ing when I needed	it.		0	0	0	0	<b>@</b>
12. The job aid materia	ls seem useful.			0	0	0	0	9
13. The test(s) were cor	nsistent with what I	was taught.		0	0	0	0	0
14. The instructor(s) we	ere prepared.			0	0	0	0	•
15. The instructor(s) we	ere available for inc	lividual help.		0	0	0	0	<b>③</b>
16. The instructor(s)' re	sponses helped me	e learn.		0	0	0	0	<b>②</b>
17. The instructor(s)' pr	resentations helped	me learn.		0	0	0	0	<b>3</b>

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

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.					<b>E</b>			
	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	<b>②</b>	0			
26. The format helped me learn.	0	0	0	0	<b>@</b>			
27. The feedback on my actions was helpful.	0	0	0	0	<b>③</b>			
28. The computer-based portion of this training was trouble-free.	0	0	8	0	0			
29. The computer response time was adequate.	0	0	0	0	<b>②</b>			
30. The software/courseware was easy to use.	0	0	0	0	<b>②</b>			
31. I could read the screens easily.	0	0	0	0	0			
32. The video was clear.	0	0	0 0	0	<b>(2)</b>			
33. The audio was clear.  (Item 34 is reserved.)	0	0	0	0	<b>②</b>			
Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satilevel of satisfaction with:	Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very Satisfied) to describe 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	$\circ$	0	0	0			
39. Sufficient training equipment to help me learn.	0	0	0	0	<b>3</b>			
40. Adequacy of the training facility to support learning.	0	0	0	0	٨			
41. This training, OVERALL.	0	0	0	0	<b>3</b>			
42. The instructor(s), OVERALL.	0	0	0	0	<b>③</b>			
Please use the space below for comments. Note: When referring to instruc	tors, u	se firs	t nam	e(s) on	dy.			
Which parts of the course were most valuable? DAVE TAVE-HT	THE	CO	URS	€	_			
WITH HUMOR AND REOVEHT EXTENSIVE EXPEN	T15	e To	= 18¢	SAR				
Which parts of the course were most valuable? DAUF TAUGHT THE COURSE  NIS  ITH HUMOR AND RROUGHT EXTENSIVE EXPENTISE TO BEAR  IN HIS EXAMPLES AND DESCRIPTIONS  Which parts of the course were least valuable?								

# 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** 

Scale and Rating Definitions:					
Disagree 2 This item is true some of the time.  Neutral 3 Neither disagree nor agree; no opinion of Agree 4 This item is true most of the time.	one wa	y or t	he oth	er.	
				m.	
Identify your shift.  Day					
Identify your status.  Permanent  Seasonal  Term	1	2	3	4	5
I had the basic knowledge and skills necessary to begin this training.	0	$\circ$	0	0	0
The course objectives focused on my job tasks.	0	0	٥	0	0
The course content matched the objectives.	0	0	0	0	0
6. The course materials helped me learn.			0	•	0
7. The course materials were easy to understand.			0	3	
The learning activities encouraged my participation.	0	0	0	0	٥
I practiced what I was taught.	0	, O.	0	<b>②</b>	0
The course length was sufficient to deliver the content.	0	0	<b>②</b>	0	0
I received this training when I needed it.	0	0	٥	0	0
The job aid materials seem useful.	0	0		0	0
The test(s) were consistent with what I was taught.	0	0	0	0	0
The instructor(s) were prepared.	0	0	0	0	<b>②</b>
The instructor(s) were available for individual help.	0	0	0	0	0
The instructor(s)' responses helped me learn.	0	0	0	8	0
	Strongly Disagree 2 This item is true none of the time or you Disagree 2 This item is true some of the time.  Neutral 3 Neither disagree nor agree; no opinion of Agree 4 This item is true most of the time.  Strongly Agree 5 This item is true all of the time or your a Not Applicable Leave the item blank.  Instructions: Use a Number 2 pencil or dark (not red) ink to consider that corresponds with your Meavily darken the "bubble" that corresponds with your Identify your shift.  Day Afternoon Night  Identify your status. Permanent Seasonal Term  I had the basic knowledge and skills necessary to begin this training.  The course objectives focused on my job tasks.  The course content matched the objectives.	Strongly Disagree 1 This item is true none of the time or your resp Disagree 2 This item is true some of the time.  Neutral 3 Neither disagree nor agree; no opinion one was Agree 4 This item is true most of the time.  Strongly Agree 5 This item is true all of the time or your answer Not Applicable Leave the item blank.  Instructions: Use a Number 2 pencil or dark (not red) ink to comple Heavily darken the "bubble" that corresponds with your resp.  Identify your shift. Day Afternoon Night  Identify your status. Permanent Seasonal Term  I had the basic knowledge and skills necessary to begin this training.  The course objectives focused on my job tasks.  The course content matched the objectives.  The course materials helped me learn.  The course materials were easy to understand.  The learning activities encouraged my participation.  I practiced what I was taught.  The course length was sufficient to deliver the content.  I received this training when I needed it.  The job aid materials seem useful.  The instructor(s) were prepared.  The instructor(s) were available for individual help.	Strongly Disagree 2 This item is true none of the time or your response in Disagree 2 This item is true some of the time.  Neutral 3 Neither disagree nor agree; no opinion one way or the 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 the Heavily darken the "bubble" that corresponds with your response.  Identify your shift. Day Afternoon Night  Identify your status. Permanent Seasonal Term 1 2  I had the basic knowledge and skills necessary to begin this training.  The course objectives focused on my job tasks.  The course content matched the objectives.  The course materials helped me learn.  The course materials were easy to understand.  The learning activities encouraged my participation.  I practiced what I was taught.  The course length was sufficient to deliver the content.  I received this training when I needed it.  The job aid materials seem useful.  The instructor(s) were prepared.  The instructor(s) were available for individual help.	Strongly Disagree 2 This item is true none of the time or your response is No.  Disagree 3 This item is true some of the time.  Neutral 3 Neithert disagree no 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.  Strongly Agree 5 This item is true all of the time or your answer is Yes.  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  Identify your status. Permanent Seasonal Term 1 2 3  I had the basic knowledge and skills necessary to begin this training.  The course objectives focused on my job tasks.  The course content matched the objectives.  The course materials helped me learn.  The course materials were easy to understand.  The learning activities encouraged my participation.  I practiced what I was taught.  The course length was sufficient to deliver the content.  I received this training when I needed it.  The job aid materials seem useful.  The instructor(s) were prepared.  The instructor(s) were available for individual help.	Strongly Disagree 2 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 and 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  Identify your status. Permanent Seasonal Term 1 2 3 4  I had the basic knowledge and skills necessary to begin this training.  The course objectives focused on my job tasks.  The course content matched the objectives.  The course materials helped me learn.  The course materials were easy to understand.  The learning activities encouraged my participation.  I practiced what I was taught.  The course length was sufficient to deliver the content.  I received this training when I needed it.  The job aid materials seem useful.  The instructor(s) were prepared.  The instructor(s) were available for individual help.

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

Thank you for your feedback.

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

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

Item numbers 18 to 23 are reserved for other class types.					<b>-</b>
	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	0
28. The computer-based portion of this training was trouble-free.	0	0	$\circ$	0	0
29. The computer response time was adequate.		0	0	0	$\circ$
30. The software/courseware was easy to use.	0	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 Sa level of satisfaction with:	tisfied)	to de	scribe	your	_
35. Notification to attend this training in time to make arrangements.		0	0	<b>(3</b> )	0
36. Accommodation of my reported special needs.	0	0	0	0	0
37. Availability of training materials.		0	0	<b>②</b>	0
20 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	0	0		0
38. Sufficient training supplies to help me learn.	_	<b>(3)</b>	0	0	0
<ul><li>38. Sufficient training supplies to help me learn.</li><li>39. Sufficient training equipment to help me learn.</li></ul>				_	$\circ$
	0	ð	0	$\circ$	_
39. Sufficient training equipment to help me learn.	0 0	<b>9</b>	0	<b>O</b>	0
<ul><li>39. Sufficient training equipment to help me learn.</li><li>40. Adequacy of the training facility to support learning.</li></ul>	0 0 0	0	0 0	<ul><li>O</li><li>O</li><li>O</li></ul>	) ()

Thank you for your feedback.

Catalog Number 73159 E

Which parts of the course were least valuable?\_

229941-1

Department of the Treasury-Internal Revenue Service

# evaluation is anonymous and should be completed on official time. Participatio 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** 

### 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.

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

Agree

This item is true most of the time.

Strongly Agree

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

Leave the item blank. Not Applicable

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	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 t	his 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	$\circ$	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
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	1
11.	I received this trainin	g when I needed i	t.		0	0	0	•	0
12.	The job aid materials	seem useful.			0	0	9	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 ind	lividual help.		0	0	0	0	•
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	9

Please do not attempt to copy this form. Duplicated forms cannot be scanned. Thank you for your feedback.

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

Commence of the commence of th	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.	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:	isfied)	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	$\circ$	0	0	•
	37. Availability of training materials.	0	0	0		•
	38. Sufficient training supplies to help me learn.	0	0	0	0	<b>③</b>
	39. Sufficient training equipment to help me learn.	0	0	0	•	0
	40. Adequacy of the training facility to support learning.	0	0	$\circ$	9	0
	41. This training, OVERALL.	0	0	0	•	0
	42. The instructor(s), OVERALL.	0	0	0	0	9
	Please use the space below for comments. Note: When referring to instruc	tors, t	ıse fir	st nam	e(s) or	ıly.

Thank you for your feedback.

Which parts of the course were most valuable? Overall structure of branche of

Which parts of the course were least valuable?

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** 

365246

### 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 knowle	edge and skills ne	cessary to begin t	his training.	0	0		0	0
4.	The course objectives	focused on my j	ob tasks.		0	0	0	•	0
5.	The course content ma	atched the objecti	ves.		0	0	0	0	•
6.	The course materials h	nelped me learn.			0	0	0	0	•
7.	The course materials v	were easy to unde	erstand.		0	$\circ$	$\bigcirc$	0	•
8.	The learning activities	encouraged my	participation.		0	0	0	0	•
9.	I practiced what I was	taught.			0	0	0		•
10.	The course length was	sufficient to deli	iver the content.		0	0	0	0	•
11.	I received this training	when I needed is	t.		0	0	0	•	0
12,	The job aid materials s	seem useful.			0	0	0	$\circ$	•
13.	The test(s) were consis	stent with what I	was taught.		0	0	0	•	0
14.	The instructor(s) were	prepared.			0	0	0	0	•
15.	The instructor(s) were	available for ind	ividual help.		0	0	0	0	•
16.	The instructor(s)' respe	onses helped me	learn.		0	0	0	0	•
17.	The instructor(s)' prese	entations helped	me learn.		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. Participatio Your feedback provides important information to improve this course. This is voluntary but strongly encouraged. Thank you

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

the control of the co	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
3.54655.000	30. The software/courseware was easy to use.	0	0	0	0	0
	31. I could read the screens easily.		0	0	0	$\circ$
	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 Sat	 isfied)	to de	scribe	your	
	level of satisfaction with:				•	
	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	•
	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	
	42. The instructor(s), OVERALL.	0	0	0	0	•
	Please use the space below for comments. Note: When referring to instruc	ctors, ı	ıse firs	st nam	e(s) oı	aly.
	Which parts of the course were most valuable?				<del></del>	
	Which parts of the course were least valuable?					

Standardized Level 1 - Trainee's Course Evaluation

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

		and the second second	· ·	
<b>ACES Class</b>	Niumbar			
MUED CIASS	MALIDE			
	and the second second	<del></del>		<del></del>

### **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.

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.

Leave the item blank. Not Applicable

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					
2. Identify your status. Permanent	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
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	. <u> </u>	•	0
8. The learning activities encouraged my participation.	0	0		0	0
9. I practiced what I was taught.			•	0	0
10. The course length was sufficient to deliver the content.	0	0	•	$\circ$	0
11. I received this training when I needed it.	0	0	0		0
12. The job aid materials seem useful.	0	$\circ$	0	$\circ$	0
13. The test(s) were consistent with what I was taught.	0	0	0	$\circ$	0
14. The instructor(s) were prepared.	0	0	0	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
17. The instructor(s)' presentations helped me learn.		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

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.	0	0	0	0	0
(Item 34 is reserved.) Assign a rating of "1" through "5" (1 = Very Dissatisfied-5 = Very	Satisfied)	to de	scribe	your	
level of satisfaction with:		· ·		. ~	
35. Notification to attend this training in time to make arrangements.		0	O	O	$\cup$
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	$\circ$	0	0	0
	1	$\bigcirc$	0	0	0
39. Sufficient training equipment to help me learn.		$\cup$	~		
<ul><li>39. Sufficient training equipment to help me learn.</li><li>40. Adequacy of the training facility to support learning.</li></ul>	0	0	0	0	0
	0	0	0	0	0
40. Adequacy of the training facility to support learning.	0 0 0	0 0 0	0 0	0 0	0
<ul><li>40. Adequacy of the training facility to support learning.</li><li>41. This training, OVERALL.</li></ul>	structors, u	o o o o o o o o o o o o o o o o o o o	O O O	c(s) or	() () () () () () () () () () () () () (

Thank you for your feedback.

Catalog Number 73159 E

229941-1

Department of the Treasury-Internal Revenue Service

## **ASSROOM**

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 36216

### 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.	O Permanent	O Seasonal	○ Term	1	2	3	4	 5
3.	I had the basic knowledge	edge and skills ne	ecessary to begin t	his training.	0	0	0	0	0
4.	. The course objectives focused on my job tasks.				0	<b>@</b>	0	0	0
5.	5. The course content matched the objectives.					0	0	0	Ø
6.	The course materials	helped me learn.			0	0	0	0	Ø
7.	The course materials	were easy to unde	erstand.		0	0	0	0	<b>©</b>
8.	The learning activitie	s encouraged my	participation.		0	0	0	0	<b>O</b>
9.	9. I practiced what I was taught.				0	0	0	0	<b>®</b>
10.	). The course length was sufficient to deliver the content.				0	0	0	0	•
11.	I. I received this training when I needed it.				0	0	0	0	Ø
12.	2. The job aid materials seem useful.				0	0	0	0	0
13.	3. The test(s) were consistent with what I was taught.				0	0	0	0	<b>®</b>
14.	The instructor(s) were	e prepared.			0	0	0	0	0
15.	5. The instructor(s) were available for individual help.				0	0	0	0	<b>@</b>
16.	The instructor(s)' resp	oonses helped me	learn.		0	0	0	0	
17.	The instructor(s)' pres	sentations helped	me learn.		lacksquare	0	0	0	<b>(2)</b>

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

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 Sat level of satisfaction with:	isfied)	to de	scribe	your	
35. Notification to attend this training in time to make arrangements.	0	0		0	۶
36. Accommodation of my reported special needs.	0	0	0	0	<b>②</b>
37. Availability of training materials.	0	0	0	0	Ø
38. Sufficient training supplies to help me learn.	0	0	0	0	•
39. Sufficient training equipment to help me learn.	0	0	0	0	<b>@</b>
40. Adequacy of the training facility to support learning.	0	0	0	0	3
41. This training, OVERALL.	0	0	Ó	0	<b>Ø</b>
42. The instructor(s), OVERALL.		0	0	0	<b>D</b>
Please use the space below for comments. Note: When referring to instruc	etors, u	ıse firs	st nam	e(s) or	aly.
Which parts of the course were most valuable?					
Which parts of the course were least valuable?					

Thank you for your feedback.

Catalog Number 73159 E

229941-1

Department of the Treasury-Internal Revenue Service

## SSROOM

Standardized Level 1 - Trainee's Course Evaluation

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

365246 **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	○ Afternoon	○ Night					
2.	Identify your status.	Permanent	○ Seasonal	○ Term	1	2	3	4	5
3.	I had the basic knowl	edge and skills ne	cessary to begin t	his training.	0	$\circ$	0	0	•
4.	The course objective	s focused on my j	ob tasks.		0	0	0	0	<b>(</b>
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	•
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 cons	istent with what I	was taught.		0	0	0	0	
14.	The instructor(s) were	e prepared.			0	0	0	0	<b>Ø</b>
15.	The instructor(s) were	e available for ind	ividual help.		0	0	0	0	<b>3</b>
16.	The instructor(s)' resp	ponses helped me	learn.		0	0	0	0	<b>②</b>
17.	The instructor(s)' pre	sentations helped	me learn.			0	0	0	•

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

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

3 2	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	
	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
	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	0
	32. The video was clear.	0	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 Sa level of satisfaction with:	 tisfied]	to de	scribe	your	<u>.</u>
	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
	37. Availability of training materials.		0	0	0	•
	38. Sufficient training supplies to help me learn.		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	<b>@</b>
	41. This training, OVERALL.	0	0	0	0	<b>@</b>
	42. The instructor(s), OVERALL.		0	0	0	•
				+ nam	o(c) or	nlv.
	Please use the space below for comments. Note: When referring to instru	ctors, i	ise mr	t Ham	r(a) or	

Thank you for your feedback.

Catalog Number 73159 E

229941-1

## **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 ELMS # 36 5246

### 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	t. 🕜 Day	○ Afternoon	O Night					
2. Identify your state	is.  Permanent	○ Seasonal	○ Term	1	2	3		5
3. I had the basic kn	owledge and skills n	ecessary to begin t	his training.	0	0		0	0
4. The course object	4. The course objectives focused on my job tasks.					<u></u>	0	0
5. The course conter	nt matched the object	tives.		0	0	0	0	<b>(4)</b>
6. The course materi	als helped me learn.			0	0	0	0	<b>©</b>
7. The course materi	als were easy to und	lerstand.		0	0	0	0	<b>(2)</b>
8. The learning activ	ities encouraged my	participation.		0	0	0	0	<b>@</b>
9. I practiced what I	was taught.			0	0	0	0	0
10. The course length	was sufficient to de	liver the content.		0	0	0	0	ø
11. I received this training when I needed it.				0	0	0	0	<b>Ø</b>
12. The job aid materials seem useful.				0	0	0	0	9
13. The test(s) were c	onsistent with what I	l was taught.		0	0	0	0	٥
14. The instructor(s)	were prepared.			0	$\circ$	0	0	<b>@</b>
15. The instructor(s)	were available for inc	dividual help.		0	0	0	0	<b>②</b>
16. The instructor(s)'	responses helped me	e learn.		0	0	0	$\circ$	•
17. The instructor(s)'	presentations helped	I me learn.			Ō	$\circ$	0	0

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Thank you for your feedback.

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

Item numbers 18 to 23 are reserved for other class types.					<u> </u>			
	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 Satisfied of satisfaction with:	isfied)	to de	scribe	your				
35. Notification to attend this training in time to make arrangements.	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			
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	<b>@</b>			
41. This training, OVERALL.	0	0	0	0	٥			
42. The instructor(s), OVERALL.	0	0	0	0	<b>Ø</b>			
Please use the space below for comments. Note: When referring to instruc	tors, u	se firs	t nam	e(s) or	ıly.			
Which parts of the course were most valuable?	· · · · · ·		-		_			
Which parts of the course were least valuable?	•				_			