

Course/Teacher Evaluation Form

Course	WebSphere MQ	Date	8/23/07
Name (Optional)	VAI Bond	Company	UBS

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

1. Were the course objectives presented in a clear, comprehensive manner?
2. Did the course meet its stated objectives?
3. Did the course meet your expectations?
4. Was the workshop/hands-on portion of this course effective?
5. Would you recommend this course to others?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO

Instructor

6. Ability to Communicate
7. Knowledge of Subject Matter
8. Effective Use of Support Materials
9. Responsiveness to Class
10. Overall Professionalism

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	<input checked="" type="radio"/> 4	3	2	1
7. Knowledge of Subject Matter	<input checked="" type="radio"/> 4	3	2	1
8. Effective Use of Support Materials	<input checked="" type="radio"/> 4	3	2	1
9. Responsiveness to Class	<input checked="" type="radio"/> 4	3	2	1
10. Overall Professionalism	<input checked="" type="radio"/> 4	3	2	1

May we use you as a reference?

<input type="radio"/> YES	<input type="radio"/> NO
---------------------------	--------------------------

Manual

11. Usefulness
12. Readability
13. Organization

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	<input checked="" type="radio"/> 4	3	2	1
12. Readability	<input checked="" type="radio"/> 4	3	2	1
13. Organization	<input checked="" type="radio"/> 4	3	2	1

General

14. Overall Quality of Instructions

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	<input checked="" type="radio"/> 4	3	2	1

Suggestions/Comments

Is there any other information about the software you would still like to know?

Any others to whom we should send information on SYS-ED?

Name	Title	Company
Address	City	State Zip

Course/Teacher Evaluation Form

Course <i>MQ Series for COBOL PROGRAMMERS</i>	Date <i>08/23/2007</i>
Name (Optional) <i>ETHEL SPINITSER</i>	Company <i>VBS</i>

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

1. Were the course objectives presented in a clear, comprehensive manner?
2. Did the course meet its stated objectives?
3. Did the course meet your expectations?
4. Was the workshop/hands-on portion of this course effective?
5. Would you recommend this course to others?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO

Instructor

6. Ability to Communicate
7. Knowledge of Subject Matter
8. Effective Use of Support Materials
9. Responsiveness to Class
10. Overall Professionalism

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	<input checked="" type="radio"/> 4	3	2	1
7. Knowledge of Subject Matter	<input checked="" type="radio"/> 4	3	2	1
8. Effective Use of Support Materials	<input checked="" type="radio"/> 4	3	2	1
9. Responsiveness to Class	<input checked="" type="radio"/> 4	3	2	1
10. Overall Professionalism	<input checked="" type="radio"/> 4	3	2	1

May we use you as a reference?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
--------------------------------------	--------------------------

Manual

11. Usefulness
12. Readability
13. Organization

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	<input checked="" type="radio"/> 4	3	2	1
12. Readability	<input checked="" type="radio"/> 4	3	2	1
13. Organization	<input checked="" type="radio"/> 4	3	2	1

General

14. Overall Quality of Instructions

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	<input checked="" type="radio"/> 4	3	2	1

Suggestions/Comments

Is there any other information about the software you would still like to know?

MQ Series Administration Class

Any others to whom we should send information on SYS-ED?

Name	Title	Company	
Address	City	State	Zip

Course/Teacher Evaluation Form

Course <i>MS in COMOL</i>	Date <i>08.29.2007</i>
Name (Optional) <i>John DeSantis</i>	Company <i>ULBS</i>

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

- Were the course objectives presented in a clear, comprehensive manner?
- Did the course meet its stated objectives?
- Did the course meet your expectations?
- Was the workshop/hands-on portion of this course effective?
- Would you recommend this course to others?

YES	NO
YES	NO
YES	NO
YES	NO
YES	NO

Instructor

- Ability to Communicate
- Knowledge of Subject Matter
- Effective Use of Support Materials
- Responsiveness to Class
- Overall Professionalism

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	4	3	2	1
7. Knowledge of Subject Matter	4	3	2	1
8. Effective Use of Support Materials	4	3	2	1
9. Responsiveness to Class	4	3	2	1
10. Overall Professionalism	4	3	2	1

May we use you as a reference?

YES	NO
-----	----

Manual

- Usefulness
- Readability
- Organization

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	4	3	2	1
12. Readability	4	3	2	1
13. Organization	4	3	2	1

General

- Overall Quality of Instructions

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	4	3	2	1

Suggestions/Comments

Is there any other information about the software you would still like to know?

Any others to whom we should send information on SYS-ED?

Name	Title	Company	
Address	City	State	Zip

Course/Teacher Evaluation Form

Course <u>MQ for COBOL</u>	Date <u>8/20-23 2007</u>
Name (Optional)	Company <u>UBS</u>

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

1. Were the course objectives presented in a clear, comprehensive manner?
2. Did the course meet its stated objectives?
3. Did the course meet your expectations?
4. Was the workshop/hands-on portion of this course effective?
5. Would you recommend this course to others?

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Instructor

6. Ability to Communicate
7. Knowledge of Subject Matter
8. Effective Use of Support Materials
9. Responsiveness to Class
10. Overall Professionalism

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	<input checked="" type="checkbox"/> 4	3	2	1
7. Knowledge of Subject Matter	<input checked="" type="checkbox"/> 4	3	2	1
8. Effective Use of Support Materials	<input checked="" type="checkbox"/> 4	3	2	1
9. Responsiveness to Class	<input checked="" type="checkbox"/> 4	3	2	1
10. Overall Professionalism	<input checked="" type="checkbox"/> 4	3	2	1

May we use you as a reference?

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
---	-----------------------------

Manual

11. Usefulness
12. Readability
13. Organization

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	4	<input checked="" type="checkbox"/> 3	2	1
12. Readability	4	<input checked="" type="checkbox"/> 3	2	1
13. Organization	4	<input checked="" type="checkbox"/> 3	2	1

General

14. Overall Quality of Instructions

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	<input checked="" type="checkbox"/> 4	3	2	1

Suggestions/Comments

Is there any other information about the software you would still like to know?

Any others to whom we should send information on SYS-ED?

Name	Title	Company		
Address	City	State	Zip	

Course/Teacher Evaluation Form

Course <i>MD Series</i>	Date : <i>08/23/07</i>
Name (Optional) <i>OLEG MEDVEDOVSKIY</i>	Company <i>UBS</i>

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

- Were the course objectives presented in a clear, comprehensive manner?
- Did the course meet its stated objectives?
- Did the course meet your expectations?
- Was the workshop/hands-on portion of this course effective?
- Would you recommend this course to others?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO

Instructor

- Ability to Communicate
- Knowledge of Subject Matter
- Effective Use of Support Materials
- Responsiveness to Class
- Overall Professionalism

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	<input checked="" type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
7. Knowledge of Subject Matter	<input type="radio"/> 4	<input checked="" type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
8. Effective Use of Support Materials	<input type="radio"/> 4	<input checked="" type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
9. Responsiveness to Class	<input checked="" type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
10. Overall Professionalism	<input type="radio"/> 4	<input checked="" type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

May we use you as a reference?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
--------------------------------------	--------------------------

Manual

- Usefulness
- Readability
- Organization

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	<input type="radio"/> 4	<input type="radio"/> 3	<input checked="" type="radio"/> 2	<input type="radio"/> 1
12. Readability	<input type="radio"/> 4	<input type="radio"/> 3	<input checked="" type="radio"/> 2	<input type="radio"/> 1
13. Organization	<input type="radio"/> 4	<input type="radio"/> 3	<input checked="" type="radio"/> 2	<input type="radio"/> 1

General

- Overall Quality of Instructions

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	<input type="radio"/> 4	<input checked="" type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

Suggestions/Comments

Is there any other information about the software you would still like to know?

Any others to whom we should send information on SYS-ED?

Name	Title	Company		
Address	City	State	Zip	

Course/Teacher Evaluation Form

Course MQ SERIES FOR COBOL PROGRAMMERS	Date 8/20 - 8/23/2007
Name (Optional)	Company UBS

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

- Were the course objectives presented in a clear, comprehensive manner?
- Did the course meet its stated objectives?
- Did the course meet your expectations?
- Was the workshop/hands-on portion of this course effective?
- Would you recommend this course to others?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO

Instructor

- Ability to Communicate
- Knowledge of Subject Matter
- Effective Use of Support Materials
- Responsiveness to Class
- Overall Professionalism

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	<input checked="" type="radio"/> 4	3	2	1
7. Knowledge of Subject Matter	<input checked="" type="radio"/> 4	3	2	1
8. Effective Use of Support Materials	4	3	<input checked="" type="radio"/> 2	1
9. Responsiveness to Class	4	<input checked="" type="radio"/> 3	2	1
10. Overall Professionalism	<input checked="" type="radio"/> 4	3	2	1

May we use you as a reference?

<input type="radio"/> YES	<input checked="" type="radio"/> NO
---------------------------	-------------------------------------

Manual

- Usefulness
- Readability
- Organization

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	4	3	<input checked="" type="radio"/> 2	1
12. Readability	4	3	<input checked="" type="radio"/> 2	1
13. Organization	4	3	<input checked="" type="radio"/> 2	1

General

- Overall Quality of Instructions

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	4	<input checked="" type="radio"/> 3	2	1

Suggestions/Comments

FOR THE LAB EXERCISES, IT WOULD BE HELPFUL TO HAVE PROGRAMS WITH ERRORS AND LET THE STUDENTS DEBUG THE PROGRAMS (IN ADDITION TO CREATING PROGRAMS)

Is there any other information about the software you would still like to know?

WIKEN TO USE MQ, DESIGN

Any others to whom we should send information on SYS-ED?

Name	Title	Company
Address	City	State Zip

Course/Teacher Evaluation Form

Course <i>MQ for COBOL Programmers</i>	Date <i>8/20/07 - 8/23/07</i>
Name (Optional)	Company <i>UBS</i>

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

- Were the course objectives presented in a clear, comprehensive manner?
- Did the course meet its stated objectives?
- Did the course meet your expectations?
- Was the workshop/hands-on portion of this course effective?
- Would you recommend this course to others?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO

Instructor

- Ability to Communicate
- Knowledge of Subject Matter
- Effective Use of Support Materials
- Responsiveness to Class
- Overall Professionalism

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
7. Knowledge of Subject Matter	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
8. Effective Use of Support Materials	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
9. Responsiveness to Class	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
10. Overall Professionalism	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

May we use you as a reference?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
--------------------------------------	--------------------------

Manual

- Usefulness
- Readability
- Organization

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
12. Readability	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1
13. Organization	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

General

- Overall Quality of Instructions

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	<input type="radio"/> 4	<input type="radio"/> 3	<input type="radio"/> 2	<input type="radio"/> 1

Suggestions/Comments

Manual need more clarification, Instructor was needed to add more detail which was not found or clarify in the manual

Is there any other information about the software you would still like to know?

Any others to whom we should send information on SYS-ED?

Name	Title	Company		
Address	City	State	Zip	

Course/Teacher Evaluation Form

Course <i>MO</i>	Date <i>8/23/07</i>
Name (Optional)	Company <i>UBS</i>

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

1. Were the course objectives presented in a clear, comprehensive manner?
2. Did the course meet its stated objectives?
3. Did the course meet your expectations?
4. Was the workshop/hands-on portion of this course effective?
5. Would you recommend this course to others?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO
<input checked="" type="radio"/> YES	<input type="radio"/> NO

Instructor

6. Ability to Communicate
7. Knowledge of Subject Matter
8. Effective Use of Support Materials
9. Responsiveness to Class
10. Overall Professionalism

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	4	3	2	1
7. Knowledge of Subject Matter	4	3	2	1
8. Effective Use of Support Materials	4	3	2	1
9. Responsiveness to Class	4	3	2	1
10. Overall Professionalism	4	3	2	1

May we use you as a reference?

<input checked="" type="radio"/> YES	<input type="radio"/> NO
--------------------------------------	--------------------------

Manual

11. Usefulness
12. Readability
13. Organization

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	4	3	2	1
12. Readability	4	3	2	1
13. Organization	4	3	2	1

General

14. Overall Quality of Instructions

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	4	3	2	1

Suggestions/Comments *More detail comments inside sample programs.*

Is there any other information about the software you would still like to know?

Any others to whom we should send information on SYS-ED?

Name	Title	Company	
Address	City	State	Zip

Course/Teacher Evaluation Form

Course <i>MQ</i>	Date <i>08/23/2007</i>
Name (Optional) <i>DAVID REEN-KOV</i>	Company <i>UBS</i>

Course evaluations are important to SYS-ED. Your feedback will enable us to monitor and update our courseware. We would appreciate your taking a few minutes to fill out this form.

Course Content

- Were the course objectives presented in a clear, comprehensive manner?
- Did the course meet its stated objectives?
- Did the course meet your expectations?
- Was the workshop/hands-on portion of this course effective?
- Would you recommend this course to others?

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Instructor

- Ability to Communicate
- Knowledge of Subject Matter
- Effective Use of Support Materials
- Responsiveness to Class
- Overall Professionalism

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
6. Ability to Communicate	<input checked="" type="radio"/> 4	3	2	1
7. Knowledge of Subject Matter	<input checked="" type="radio"/> 4	3	2	1
8. Effective Use of Support Materials	<input checked="" type="radio"/> 4	3	2	1
9. Responsiveness to Class	<input checked="" type="radio"/> 4	3	2	1
10. Overall Professionalism	<input checked="" type="radio"/> 4	3	2	1

May we use you as a reference?

<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
---	-----------------------------

Manual

- Usefulness
- Readability
- Organization

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
11. Usefulness	<input checked="" type="radio"/> 4	3	2	1
12. Readability	<input checked="" type="radio"/> 4	3	2	1
13. Organization	<input checked="" type="radio"/> 4	3	2	1

General

- Overall Quality of Instructions

EXCELLENT GOOD FAIR POOR

	EXCELLENT	GOOD	FAIR	POOR
14. Overall Quality of Instructions	<input checked="" type="radio"/> 4	3	2	1

Suggestions/Comments

Is there any other information about the software you would still like to know?

Any others to whom we should send information on SYS-ED?

Name	Title	Company		
Address	City	State	Zip	

