

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: David Silverberg
Mary Abdill

A. Course Objectives: (1 LOW → 5 HIGH)

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

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

B. Course Content and Design

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

C. Quality of Instruction

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

D. Course Administration

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

E. Applications

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

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

Knowing how to use file aid screens

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

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

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

If yes, were they appropriate? _____

List any additional prerequisite(s) you think are necessary.

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

Explain low scores (1 or 2) for sections A-D

DCS

OEEAS

OSES

OASSIS

OESAE

OTSO

ODS

ORSIS

OTHER

NAME (optional): _____

Series _____

Grade _____

Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: ~~Donald Silvestro~~
Mary Abdill

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

Many! Best new topic for me was that selection criteria can be saved, edited, etc.

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there is so much new information, this class could easily be 2 dup with more practice sessions. Instructor was great!

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

NAME (optional):

Series 2210 Grade 13 Job Title SYSTEMS ANALYST

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: ~~David Silverberg~~
Mary Abtill

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If yes, were they appropriate? yes

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<input type="checkbox"/> OASSIS	<input type="checkbox"/> OESAE	<input type="checkbox"/> OTSO
<input type="checkbox"/> ODS	<input type="checkbox"/> ORSIS	<input type="checkbox"/> OTHER

NAME (optional): _____
Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: David Silverberg
 MARY ADALL

A. Course Objectives: (1 LOW → 5 HIGH)

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| <input type="checkbox"/> ODS | <input checked="" type="checkbox"/> ORSIS | <input type="checkbox"/> OTHER |

NAME (optional): _____

Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: ~~David Silverberg~~
MARY ABILL

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

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H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

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NAME (optional): _____
Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: ~~David Silverberg~~
Mary Abdill

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1.	1	2	3	4	(5)	7.	1	2	3	4	5
2.	1	2	3	(4)	5	8.	1	2	3	4	5
3.	1	2	3	4	(5)	9.	1	2	3	4	5
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3. Organization and presentation.	1	2	3	(4)	5	
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1. Course announcements, employee notifications were clear and prompt.	1	2	3	4	(5)	
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3. Appropriate computer resources were available. (check N/A if applicable)	1	2	3	4	(5)	

E. Applications

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

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

I will be able to look through various types of Data Sets to find important info to help w/ my job

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

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

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

If yes, were they appropriate? _____

List any additional prerequisite(s) you think are necessary.

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

NAME (optional): _____

Series _____

Grade _____

Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: David Silverberg

Mary Ann

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NAME (optional): _____
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Instead of trial and error use of file-aid I now have a grasp on the basics

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

If yes, were they appropriate? NO time to learn tso in the course so it's a good prereq

List any additional prerequisite(s) you think are necessary.

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

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Had book of slides she skipped through without using. Would have been better to take my own notes, at least the id have been coherent

- | | | |
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Mary Abdill

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Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

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Mary Abdill

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5.	1	2	3	4	5		11.	1	2	3	4	5	
6.	1	2	3	4	5		12.	1	2	3	4	5	

B. Course Content and Design

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

C. Quality of Instruction

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

D. Course Administration

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

E. Applications

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

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

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

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

If yes, were they appropriate? _____

List any additional prerequisite(s) you think are necessary. _____

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

Explain low scores (1 or 2) for sections A-D

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

NAME (optional): _____
Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: ~~David Silverberg~~
MARY ABPILL

A. Course Objectives: (1 LOW → 5 HIGH)

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

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

B. Course Content and Design

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

C. Quality of Instruction

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

D. Course Administration

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

E. Applications

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

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

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

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

If yes, were they appropriate? _____

List any additional prerequisite(s) you think are necessary.

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

Explain low scores (1 or 2) for sections A-D

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

NAME (optional): _____

Series _____

Grade GS-13

Job Title IT SPECIALIST

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: David Silverberg
Mary Abdill

A. Course Objectives: (1 LOW → 5 HIGH)

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

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

B. Course Content and Design

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

C. Quality of Instruction

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

D. Course Administration

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

E. Applications

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

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

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

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

If yes, were they appropriate? _____

List any additional prerequisite(s) you think are necessary.

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

Explain low scores (1 or 2) for sections A-D

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

NAME (optional): _____
Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: ~~David Silverberg~~
MARY ABDILL

A. Course Objectives: (1 LOW → 5 HIGH)

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

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

B. Course Content and Design

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

C. Quality of Instruction

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

D. Course Administration

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

E. Applications

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

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

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

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

If yes, were they appropriate? YES

List any additional prerequisite(s) you think are necessary.

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

Explain low scores (1 or 2) for sections A-D

Good class - Should hold more often.

DCS

OEAS

OSES

OASSIS

OESAE

OTSO

ODS

ORSIS

OTHER

NAME (optional):

Series

2210

Grade

13

Job Title

LEAD IT SPECIALIST

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: David Silverberg-
Mary Abdill

A. Course Objectives: (1 LOW → 5 HIGH)

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

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

B. Course Content and Design

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

C. Quality of Instruction

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

D. Course Administration

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

E. Applications

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

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

This will be helpful in my work.

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

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

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

If yes, were they appropriate? _____

List any additional prerequisite(s) you think are necessary.

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

Explain low scores (1 or 2) for sections A-D

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

NAME (optional): _____
Series _____ Grade _____ Job Title _____

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID for Analysts

Date: May 29, 2008

Primary Instructor: David Silverberg, Mary Abdill

A. Course Objectives: (1 LOW → 5 HIGH)

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

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

B. Course Content and Design

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

C. Quality of Instruction

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

D. Course Administration

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

E. Applications

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

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

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

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

If yes, were they appropriate? Yes

List any additional prerequisite(s) you think are necessary.

H. Other Comments (suggestions to improve the course, etc.) use back of form; if necessary

Explain low scores (1 or 2) for sections A-D

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

NAME (optional): _____
 Series _____ Grade _____ Job Title _____