

Course Evaluation Technical Training for Professional Development

Course Title and Number: FILE-AID FOR PROGRAMMERS #031440

Date: 02/26-27/09

Primary Instructor: Dave Silverberg

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)

Utilizing what I learned in this class will allow me to create AD hoc reports for analysts quickly.

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. *None*

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): *Elaine Sapp*
 Series *GS 2010* Grade *12* Job Title *IT Specialist (AppSw + Sys Anal)*

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ADDITIONAL FUNCTIONALITY AVAILABLE THRU FILEAID THAT I WAS NOT AWARE OF

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

NAME (optional):

Series GS Grade 12 Job Title IT Specialist

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Great course! keep it up!

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