

**BIS Program Evaluation**  
***“Technology Controls”***

Location

Date

**Please take a few moments to evaluate our program. Your responses will help us to structure our workshops and services to best meet the needs of the exporting community. We take your comments seriously. Thank you in advance for your time and effort.**

1) Please describe your objectives in coming to our program

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2) To what extent were your objectives accomplished? (circle one)

Not at all      Somewhat      Generally      Mostly      Completely

3) Did the registration fee for the program accurately reflect the value of the information presented to you?

Not at all      Somewhat      Generally      Mostly      Completely

4) If not, why?

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5) What do you consider the most important concept/skill presented during the program?

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6) What do you consider the least important concept/skill presented during the program?

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7) How did you find out about this program? \_\_\_\_\_

8) Have you previously attended any BIS programs? \_\_\_\_\_ If yes, how many? \_\_\_\_\_

9) How long have you worked in the export control field? (circle one)

Less than 1 year      1 to 3 years      3 to 5 years      Over 5 years

10) How comfortable were you with the subject matter before the program? (circle one)

Not at all      Somewhat      Generally      Mostly      Completely

11) After the program? (circle one)

Not at all      Somewhat      Generally      Mostly      Completely

**Please review the following statements and indicate how strongly you agree or disagree**

12) The information presented at the program will assist me in my export compliance responsibilities (circle one)

Strongly Disagree      Disagree      No opinion      Agree      Strongly Agree

13) The information presented met my expectations of the goals set out in the course description (circle one)

Strongly Disagree      Disagree      No opinion      Agree      Strongly Agree

14) The agenda was well organized (circle one)

Strongly Disagree      Disagree      No opinion      Agree      Strongly Agree

15) The hands-on learning activities assisted in my understanding of the program material (circle one)

Strongly Disagree      Disagree      No opinion      Agree      Strongly Agree

16) I would recommend this program to others (circle one)

Strongly Disagree      Disagree      No opinion      Agree      Strongly Agree

17) The copies of slides and other handout material will be useful to me as a future reference (circle one)

Strongly Disagree      Disagree      No opinion      Agree      Strongly Agree

18) The length of time allocated to each topic was appropriate (circle one)

Strongly Disagree      Disagree      No opinion      Agree      Strongly Agree

**Please rate the clarity of seminar topics, as follows: 1= poor, 2= fair, 3= average, 4= good, 5= excellent:**

Technical Data and Software	1	2	3	4	5
Export License Requirements for Technical Data and Software	1	2	3	4	5
Decmed Export Controls	1	2	3	4	5
Overall Seminar Rating	1	2	3	4	5

Please indicate any suggestions you have for improvements to the workshop or topics for future workshops or any additional comments you may have about the program.

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(Optional Information)

Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Title: \_\_\_\_\_  
Facsimile: \_\_\_\_\_  
Company: \_\_\_\_\_

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