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## National Fire Academy Long-Term Evaluation Form

This login is for both students and supervisors. Usernames and passwords are case-sensitive. Please enter them exactly as they appear in the notification e-mail.

O.M.B. No. 1660-0039 (Expires August 31, 2011)

### Course Evaluation Login

Username:

Password:

Login

### PAPERWORK BURDEN DISCLOSURE NOTICE

#### FEMA Form 078-0-2 (Supervisors)

Public reporting burden for this data collection is estimated to average 6.5 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. Although voluntary, you are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (1660-0039) **NOTE: Do not send your completed form to this address.**

### PAPERWORK BURDEN DISCLOSURE NOTICE

#### FEMA Form 078-0-2A (Students)

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FEMA Form 078-0-2 (AUG 11) and FEMA Form 078-0-2A (AUG 11)

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# National Fire Academy Long-Term Evaluation Form for Students (FEMA Form 078-0-2A)

## Completion Instructions

1. Begin by checking the course dates and title below to make sure this is your course.
2. Use the buttons at the bottom of each page to navigate through the form.
3. At any time you may click the **Save For Later** button to save your form and return to it later.

|                      |   |
|----------------------|---|
| <b>Course Dates:</b> | 05/02/2011 - 05/13/2011   |
| <b>Course Title:</b> | Command and Control of Fire Department Operations at Natural and Man-Made Disasters |
| <b>Course Code:</b>  | R308  |

## Part 1 of 2 - Please Tell Us About Your Background and Place of Work

1. If you know it, please tell us your FDID# (Fire Departments Only).

 

2. How many NFA *on-campus resident* courses have you taken in the course of your career?

3. How many NFA *off-campus* courses have you taken in the course of your career?

4. How would you describe the primary population served by your department or organization? (Mark all that apply.)

- |                                   |  |  |
|-----------------------------------|--|--|
| <input type="checkbox"/> Rural    | <input type="checkbox"/> County/district | <input type="checkbox"/> Institutional |
| <input type="checkbox"/> Suburban | <input type="checkbox"/> Parish          | <input type="checkbox"/> Government    |
| <input type="checkbox"/> Urban    | <input type="checkbox"/> Statewide       | <input type="checkbox"/> Other         |

If Other, please specify:

5. How would you describe your service organization?

- Career fire service
- Career and volunteer fire service
- Volunteer fire service
- Allied professionals
- Private/contract
- Other

If Other, please specify:

6. Please estimate the size of your department.

- |  |  |
|--|--|
| <input type="radio"/> 1 to 25 persons    | <input type="radio"/> 201 to 500 persons     |
| <input type="radio"/> 26 to 50 persons   | <input type="radio"/> 501 to 1,000 persons   |
| <input type="radio"/> 51 to 100 persons  | <input type="radio"/> 1,001 to 2,000 persons |
| <input type="radio"/> 101 to 200 persons | <input type="radio"/> Over 2,000 persons     |

6a. What percentage are career personnel?

- None
- 1 to 25%
- 26 to 50%
- 51 to 75%
- 76 to 99%
- All
- Don't Know

**6b. What percentage are volunteer personnel?**

- None
- 1 to 25%
- 26 to 50%
- 51 to 75%
- 76 to 99%
- All
- Don't Know

**7. How many years have you been in the fire service?**

If you are currently retired, indicate the years of service prior to your retirement.

- Less than 1 year
- 1 to 5 years
- 6 to 10 years
- 11 to 15 years
- 16 to 20 years
- Over 20 years
- Not Applicable

**8. What is your rank?**

- Sergeant
- Lieutenant
- Captain
- Battalion Chief
- Division Chief
- Deputy Chief
- Bureau Chief
- Assistant Chief
- Chief of Department
- Other
- Not Applicable

If Other, please specify:

**9. Please indicate your present primary responsibility.**

- Command
- Fire Suppression
- EMS
- Hazardous Materials
- Training/Instructor
- Investigation
- Inspection/Enforcement
- Fire Prevention
- Communications
- Data Processing
- Public Education
- Equipment Maintenance
- Administrative Service
- Other

If Other, please specify:

**10. Please indicate your secondary responsibilities. (Mark all that apply.)**

- Command
- Fire Suppression
- EMS
- Hazardous Materials
- Training/Instructor
- Investigation
- Inspection/Enforcement
- Fire Prevention
- Communications
- Data Processing
- Public Education
- Equipment Maintenance
- Administrative Service
- Other

If Other, please specify:

**11. How many years have you held your current responsibilities?**

- Less than 1 year
- 1 to 5 years
- 6 to 10 years
- 11 to 15 years
- 16 to 20 years
- Over 20 years

**12. What is the highest level of education you have achieved?**

- Less than high school graduation
- HS graduation or equivalency
- Some college
- Associate's degree
- Bachelor's degree

- Graduate degree
- Other
- Prefer Not To Answer

If Other, please specify:

**13. What is your sex?**

- Male
- Female
- Prefer Not To Answer

**14. How old were you on your last birthday?** (If you prefer not to answer, just leave blank.)

**15. Do you consider yourself of Hispanic or Latino/Latina ethnicity?**

- Yes
- No
- Prefer Not To Answer

**16. What is your race?** (Mark as many as apply, or none if you prefer not to answer.)

- White
- Black or African American
- Asian
- Native Hawaiian/Pacific Islander
- American Indian or Alaska Native

Save For Later

Continue

The Save for Later button will allow you to save answers already provided and come back to the form at a later time (provided the evaluation period hasn't expired) to complete it.

FEMA Form 078-0-2A (AUG 11)

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# National Fire Academy Long-Term Evaluation Form for Students (FEMA Form 078-0-2A)

## Part 2 of 2 - Course Feedback

### 1. Where did you take this course?

- At NFA in Maryland
- At a facility in my state
- Other

If Other, please specify:

### 2. Why did you take this course? (Mark all that apply.)

- Supervisor recommended it
- Attendance was required for my next duty or assignment
- For general career advancement
- Desire to broaden my perspective by working with personnel from departments across the country
- Desire to increase my technical and professional knowledge
- Other

If Other, please specify:

### 3. Did you check whether the course was from a source other than the National Fire Academy?

- Yes
- No (*Skip to question 4*)

#### 3a. Did you find it available elsewhere?

- Yes
- No (*Skip to question 4*)

#### 3b. Where else was it available?

- At a facility in my state
- At a facility in this region but not in my state
- Other

If Other, please specify:

#### 3c. Why did you choose to attend the NFA course? (Mark all that apply.)

- Asked, told to, by my supervisor
- Overall quality of the instruction, materials, etc.
- Expectation that the content would be 'cutting edge'
- Expectation that the teaching methods would be 'cutting edge'
- Desire to interact with peers from around the country
- No cost to me
- Modest cost to my department
- Other

If Other, please specify:

### 4. Have you used any of the training or information from this course on the job since returning to your department?

- Yes
- No (Skip to question 5)

**To what extent have you used information from the topics covered in your training?**

|           |   | Used a Great Deal     | Used Somewhat         | Not Used at All       | No Opportunity to Use |
|-----------|---|-----------------------|-----------------------|-----------------------|-----------------------|
| Topic #1  | Assistance in setting up of EOC and/or assume major role in EOC operation during a disaster.                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #2  | Development of an "Incident Action Plan" (IAP).   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #3  | Conducting a "Community Risk Assessment" (CRA) for natural/manmade disasters                                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #4  | Development and/or dissemination of a hazard-specific operational plan.   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #5  | Development and/or dissemination of a resource list with method(s) to access local, State, and Federal resources. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #6  | Identification of resource shortfalls and/or special needs, as based on CRA.                                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #7  | Development of plan(s) for evacuation, relocation or sheltering in place.   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #8  | Development of an "org chart" for incidents requiring an EOC.   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #9  | Identification and assessment of resource needs for extended operations, as based on CRA.                         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Topic #10 | Regularly exercise plans as developed.  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**Now indicate your level of agreement or disagreement with each statement by selecting the appropriate value.**

|   | Strongly Agree        | Agree                 | Neutral               | Disagree              | Strongly Disagree     | Not Applicable        |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 5. What I learned from this course helped me do my job better.  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 6. This course has contributed to my professional development.  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. My supervisor is aware of how this course has improved my job performance.                                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. This training has helped the department address fire-related problems in our community's high risk areas.        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9. This NFA training has led to reductions in the fire-related risks in the community.                              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 10. This course has made me more safety conscious in my work.   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 11. Prevention ideas from the course have been incorporated into the public education efforts of my department.     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 12. This NFA training has improved the performance of my department.  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 13. This training has helped my department be better prepared to respond to an "all hazards" or terrorist event(s). | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

**14. Did you leave this training expecting to develop new policies or procedures for your department?**

- Yes
- No (Skip to question 14d.)

**14a. Did you actually develop them?**

- Yes
- No (Skip to question 14d.)

**14b. Were these policies or procedures implemented?**

- Yes
- No (Skip to question 14d.)

**14c. Have these policies or procedures improved the performance of your department?**

- Yes. They definitely have. (Skip to question 15.)
- Yes, but only moderately. (Skip to question 15.)
- I'm not sure. (Skip to question 15.)
- No, they have not.

**14d. Why not? (Mark all that apply.)**

- Too different from current policies & procedures
- Budget limitations

- Political considerations
- Legal, regulatory or union contract considerations
- It's no longer part of my responsibilities
- Other

If Other, please specify:

**15. Have you shared the information you learned at the training with colleagues in the department?**

- Yes
- No (Skip to question 16.)

**15a. How did you do it? (Mark all that apply.)**

- Informally, one-on-one
- Informally, but in a group setting
- Formally in a training session
- Other

If Other, please specify:

**15b. Have those colleagues changed their job performance because of this information?**

- Yes
- No
- Don't Know

**16. Would you recommend this course to others in your department?**

- Definitely yes
- Probably
- Unsure
- Probably not
- Definitely not

**17. Have you attended other (non-NFA) courses for fire service personnel in the last three years?**

- Yes
- No (Skip to question 18.)

**17a. Where was the training delivered? (Mark all that apply.)**

- At a facility in my State
- At a regional facility, but not in my State
- Other

If Other, please specify:

**17b. Who sponsored this training? (Mark all that apply.)**

- A national professional association
- A State fire service agency
- A county fire service agency
- A State professional association
- A technical or community college
- Other

If Other, please specify:

**17c. Overall, how would you compare your NFA training with the other training you noted above? Regarding the training, would you say...**

- The NFA training was more useful
- Both training experiences were equally useful
- The other training experience was more useful

**17d. Regarding the curriculum materials, would you say...**

- The NFA curriculum was more useful
- Both curricula were equally useful
- The other curriculum materials were more useful

**18. Please describe an incident or circumstance in which you applied your training from this NFA offering.**

19. If you could change one thing to improve this training course, what would it be?

20. What do you think are the new, emerging issues in the fire service field that should be the topics for future NFA training classes?

21. Finally, please add any comments you may have.

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Continue

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## Thank you for completing this long-term evaluation.

Thank you for completing the NFA Long-Term Evaluation. We appreciate your feedback

[Close Evaluation](#)

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