**Attachment 1. Webinar Feedback Form**

Webinar Feedback Form

OMB Control No. 0920-1009

Exp. Date 02/29/2020

The public reporting burden of this collection of information is estimated to average 3 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333 ATTN: PRA (0920-0919)

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[Page 1: Background]

Thank you for attending the webinar. We strive to continually improve our technical assistance. We are interested in your honest and constructive feedback about your experiences with the webinar and satisfaction with the content and delivery. Providing feedback is completely voluntary and we greatly apreciate your feedback.

This form should take, on average, 3 minutes to complete. For the web-based form, once you begin the survey, you will be able to exit and return at a later time to edit your responses. You may edit your responses until the last page of the survey is completed. To return to a previous page, use the “Previous” button at the bottom of the page (NOT the “Back” button on your browser menu). To advance, use the “Next” button at the bottom of the page.

By continuing on to the next screen, you will have consented to complete this survey.

If you have any questions or problems, please contact dvpevaluation@cdc.gov

Thank you!

CDC Division of Violence Prevention

Prevention Practice and Translation Branch

dvpevaluation@cdc.gov

[Page 2: Content]

Section I: CONTENT

1. *Before* the webinar my understanding of the topic was:\*
* 1- Did not know anything
* 2
* 3
* 4
* 5- Knew a great deal
1. Please tell us how much you agree or disagree with the following statements:\*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **1-(Strongly Disagree)** | **2** | **3** | **4** | **5-****(Strongly Agree)** |
| The webinar topic was relevant to my work |  |  |  |  |  |
| My understanding of the topic increased as a result of the webinar |  |  |  |  |  |
| I intend to apply the information learned in the webinar to my work |  |  |  |  |  |
| The webinar was a good mechanism to learn about this topic |  |  |  |  |  |
| Overall, the webinar met my expectations |  |  |  |  |  |

1. What information on the webinar topic would you like to know more about?

\*Denotes required question

[Page 3: Delivery]

Section II: METHODS

1. The length of the webinar was: \*
* Too short
* Just right
* Too long
1. The pace of the webinar was: \*
* Too slow
* Just right
* Too fast
1. Please tell us how much you agree or disagree with the following statements:\*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **1-(Strongly Disagree)** | **2** | **3** | **4** | **5-(Strongly Agree)** | **N/A** |
| The information was presented in a logical manner |  |  |  |  |  |  |
| The poll questions and chat box discussion were an effective way to facilitate peer to peer discussion |  |  |  |  |  |  |
| The accompaying materials provided before, during or after the webinar were useful (e.g. PPT slides, handouts) |  |  |  |  |  |  |
| The amount of time provided for questions and answers during the webinar was sufficient |  |  |  |  |  |  |
| My questions or comments to the presenters were adequately addressed |  |  |  |  |  |  |

\*Denotes required question

[Page 4: Logistics]

Section III: LOGISTICS

1. What time zone were you in when you participated in the webinar?\*
* Hawaii (HST)
* Alaska (AKST)
* Pacific (PST)
* Mountain (MST)
* Central (CST)
* Eastern (EST)
* Other:
1. How did you hear about the webinar?\* (Check all that apply)
* Listserv Email
* CDC Project Officer
* Colleague
* Other:
1. Please tell us how much you agree or disagree with the following statements about the webinar:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **1-Strongly Disagree** | **2** | **3** | **4** | **5-Strongly Agree** | **N/A** |
| The date and time of the webinar was convenient  |  |  |  |  |  |  |
| The webinar was announced with enough time to register |  |  |  |  |  |  |
| The registration questions were clear |  |  |  |  |  |  |
| The registration questions did not take too long to answer  |  |  |  |  |  |  |

1. Please describe any technical or audio difficulties you experienced during the webinar:

\*Denotes required question

[Page 5: General Information ]

Section IV: GENERAL INFORMATION

1. Please provide any additional comments you have regarding the webinar:
2. What webinar topics would you like to see in the future?

\*Denotes required question

CONFIRMATION PAGE

Thank you for providing feedback to improve our webinars. If you have any questions, contact dvpevaluation@cdc.gov