National Network of Sexually Transmitted Disease Clinical Prevention Training Centers (NNPTC): Evaluation OMB No. 0920-0995

## Attachments 29 & 30

## **Basic Post-Course Evaluation Instrument**

Word version and screenshot



TODAY'S DATE	Your confidential ID number is the first two letters of your								
	FIRST name, the first two letters of your LAST name, the	FN	FN	LN	LN	М	М	D	D
M M D D Y Y	MONTH of your birth, and the DAY of your birth.	CONFIDENTIAL IDENTIFIER							

## **Basic Post-Course Evaluation**

Public reporting burden of this collection of information is estimated to average 2 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 (0920-0995).

S1.	How satisfied were	you	with	you	r ove	erall	lear	ning experience?
	very unsatisfied	①	2	3	4	(5)		very satisfied
S2.	How satisfied were	you	with	the	qual	ity of	f the	e content?
	very unsatisfied	0	0	0	0	0		very satisfied
S3.	How satisfied were	you	with	the	train	er(s)	?	
	very unsatisfied	0	0	0	0	0		very satisfied
S4.	How satisfied were	you	with	the	teac	hing	me	thods?
	very unsatisfied	0	0	0	0	0		very satisfied
S5.	What could improv	e thi	s tra	ining	j?			
S	As a result of inform setting?  O Yes O No O Not my job O I already use O Other reason  f yes, please list at	thes (plea	e pra ase s	ıctice	s fy)			ntend to make changes in your practice or at your worksite
CE1	Do you believe this  ① Yes  ① No	acti	vity v	was i	influe	ence	d by	y commercial interests?
CE2	Was this presentati ① Yes ② No	on e	vide	nce-l	base	d?		
K1b	ef. <b>How much did yo</b> no knowledg					topi 4		covered in this session BEFORE this training? all the knowledge
K1a1	t. How much do	you	kno	w AF	TER	the t	trair	ning?
	no knowleda	e	0	0	0	0	0	all the knowledge