



MPD PARTNERSHIP TRAINING SESSION SURVEY

TODAY'S DATE: _____

CSOSA thanks you for your participation in today's training. In order for us to conduct more effective training in the future, please share your opinion regarding today's session. Your participation is voluntary. Refusing to complete this survey will not result in any penalties. Your responses are important and will be treated as confidential. Responses will only be disclosed as permitted under the Privacy Act (5 U.S.C. 552a).

Please, indicate how much you agree with the following statements. Circle your answer.

1. The facilitator(s) clearly introduced the purpose and objectives at the start of the training session.

Strongly Agree Agree Neutral Disagree Strongly Disagree

2. The training session met its objectives.

Strongly Agree Agree Neutral Disagree Strongly Disagree

3. Do you believe the information covered in this training session will be useful to you in your work as a police officer?

Strongly Agree Agree Neutral Disagree Strongly Disagree

4. Please circle the number that best describes the overall quality of the training session. Note that (5) indicates the highest quality and (1) indicates is the lowest quality.

5 4 3 2 1

5. What suggestions do you have for improving future training sessions?

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 Office of Management and Budget (OMB) control number. Send comments regarding this burden estimate or another aspect of this collection of information, including suggestions for reducing this burden to:

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Washington, DC 20004*