



NATIONAL CENTER ON

Program Management and Fiscal Operations

OMB

Control Number: 0970-0401

Expiration Date: 05/31/2021

General Business Studies Certificate Feedback Survey

Thank you for participating in the General Business Studies Certificate (GBSC) offered to the Head Start community through the UMass Isenberg School of Management and the National Center on Program Management and Fiscal Operations (PMFO).

To gather feedback on this five-course online program, and as we develop other relevant professional development opportunities for the Head Start community, we ask that you complete this follow-up survey about your experience. This brief survey is voluntary, and all feedback will be kept private. To further protect your privacy please refrain from including personally identifiable information in open-ended responses.

Please note that some survey items use a multi-point scale. If you are taking the survey on your phone, you may have to scroll down to see the entire scale. When finished, click the "Submit" button at the bottom of the final page to record your responses. You are free to move throughout the survey and change responses until you click "Submit".

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13): Public reporting burden for this collection of information is estimated to average approximately 10 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, 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

A. Your Background

Q1. What is your primary role within your Head Start organization?

- Director
- Assistant Director / Associate Director
- CFO
- Manager / Coordinator
- Accounting Staff
- Bookkeeper
- Other _____

[Question below displayed IF NOT DIRECTOR in Q1]

Q2. In what area(s) does your role directly operate in the organization? Please check all that apply.

- Fiscal/Finance or Accounting
- Grants Administration
- Purchasing
- Quality Improvement
- Human Resources
- Other (please specify) _____

[Question below displayed IF CHECKED FISCAL/FINANCE OR ACCOUNTING in Q2]

Q3. What is your role in the area of fiscal/finance or accounting?

- Manager/Officer/Administrator/Supervisor
- Specialist or Analyst
- Controller or Accountant
- Coordinator or Assistant
- Other Role (please specify) _____

Q4. How many years have you served in your current primary role?

- Less than 1 year
- 1 to 4 years
- 5 to 9 years
- 10 or more years

Q5. How many years have you served in any role with Head Start?

- Less than 1 year
- 1 to 4 years
- 5 to 9 years
- 10 or more years

Q6. In what agency type do you currently work?

- Community Action Agency
- State/Local Government
- Nonprofit organization
- Institute of Higher Education
- School District
- Tribal Government
- Other _____
- I'm not sure

Q7. In what state or US territory do you currently work?

[Respondents will select one response from a drop down menu below.]

| | | | |
|-----------------------------------|-------------------------------------|--------------------------------------|--|
| <input type="radio"/> Alabama | <input type="radio"/> Kansas | <input type="radio"/> New Mexico | <input type="radio"/> Virginia |
| <input type="radio"/> Alaska | <input type="radio"/> Kentucky | <input type="radio"/> New York | <input type="radio"/> Washington |
| <input type="radio"/> Arizona | <input type="radio"/> Louisiana | <input type="radio"/> North Carolina | <input type="radio"/> West Virginia |
| <input type="radio"/> California | <input type="radio"/> Maryland | <input type="radio"/> Ohio | <input type="radio"/> Wyoming |
| <input type="radio"/> Colorado | <input type="radio"/> Massachusetts | <input type="radio"/> Oklahoma | |
| <input type="radio"/> Connecticut | <input type="radio"/> Michigan | <input type="radio"/> Oregon | <input type="radio"/> Puerto Rico |
| <input type="radio"/> Delaware | <input type="radio"/> Minnesota | <input type="radio"/> Pennsylvania | <input type="radio"/> Virgin Islands |
| <input type="radio"/> Florida | <input type="radio"/> Mississippi | <input type="radio"/> Rhode Island | <input type="radio"/> American Samoa |
| <input type="radio"/> Georgia | <input type="radio"/> Missouri | <input type="radio"/> South Carolina | <input type="radio"/> Federated States of Micronesia |
| <input type="radio"/> Hawaii | <input type="radio"/> Montana | <input type="radio"/> South Dakota | <input type="radio"/> Guam |
| <input type="radio"/> Idaho | <input type="radio"/> Nebraska | <input type="radio"/> Tennessee | <input type="radio"/> Marshall Islands |
| <input type="radio"/> Illinois | <input type="radio"/> Nevada | <input type="radio"/> Texas | <input type="radio"/> Republic of Palau |
| <input type="radio"/> Indiana | <input type="radio"/> New Hampshire | <input type="radio"/> Utah | <input type="radio"/> Northern Mariana Islands |
| <input type="radio"/> Iowa | <input type="radio"/> New Jersey | <input type="radio"/> Vermont | |

Q8. Before this program, what was your previous educational background in business and management? Please check all that apply.

- Undergraduate or associates degree coursework in business or management

IF SELECTED Q8a. Completed formal major, minor or degree?

[] Yes [] No

- Graduate coursework in business or management (MBA, MA, etc.)

IF SELECTED Q8b. Completed formal concentration or degree? [

] Yes [] No

- Non-degree-related program study (please specify): _____
- None of the above

Q9. What is your highest degree earned in any field?

- High School
- Associates
- Bachelors
- Masters
- Other (please specify) _____

Q10. Thinking back, what were your primary motivations for participating in this program initially? Please check all that apply.

- Refresh skills and knowledge
- Meet demands of agency
- Increase salary or earning power
- Get a new job
- Earn credits towards a degree
- It's required or will be required
- Other motivation (please specify) _____

B. Your Course Experience and Feedback

For the following questions, please think about each of the courses in the program separately.

- 1) Financial Accounting 221 - Spring 2018
- 2) Management 301 - Summer 2018
- 3) Business Information Systems - Fall 2018 (OIM with SAM Certification)
- 4) Non-Profit Corporate Finance - Spring 2019
- 5) Corporate Finance 497N - Summer 2019

Q11. Did you participate in the course titled *[name of course]*.

- Yes, I participated in and completed *[name of course]*.
- Yes, I participated in but did not complete *[name of course]*.
- No, I did not participate in this course.

[Question 11 will be repeated for each of the five courses listed above. If respondents indicate that they participated in the course (regardless of whether or not they completed it), they will be asked to respond to Q12, Q13, Q14, and Q15].

Name of course

Q12. Please select your level of agreement with the following statements about this course:

| | Strongly agree | Agree | Disagree | Strongly disagree | Don't know / NA |
|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| The instructor was knowledgeable in the content area. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The instructor was responsive to questions. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The instructor effectively engaged students. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The readings and materials were relevant to the course topic. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The readings and materials were interesting. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The instructor conveyed important constructs effectively. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The content of the course was relevant to my work. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| The information presented was respectful, non-judgmental, and supportive of diverse populations (i.e., free from stereotypes or bias) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| I learned something during the course that I plan to use in my work. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Q13. Please let us know whether you found the content presented in this course to be too simple, too advanced, or just about right.

- Far too advanced
- A bit too advanced
- About right
- A bit too simple
- Far too simple

Q14. Before this course, my knowledge of the content/topics addressed can be best described as...

- No knowledge
- Minimal knowledge
- Moderate knowledge
- A high level of knowledge

Q15. After this course, my knowledge of the content/topics addressed can be best described as...

- No knowledge
- Minimal knowledge
- Moderate knowledge
- A high level of knowledge

C. Your Overall Program Experience and Feedback

In the next two questions, please indicate the extent to which your participation in this program has impacted your work. If it is too early to tell or the change does not apply to you, please check the appropriate box.

Q16. To what extent did your experience with the program result in the following benefits for you in your own work life?

| | To a great extent | To a moderate extent | To a small extent | Not at all | Too early to tell / NA |
|---|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|
| Gained more knowledge in general. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Gained new skills I can use in my role. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Gave me new understanding of my work. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Gained new job-related tools or resources. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Helped me address specific issues in my job responsibilities. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Expanded my network of colleagues. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Q17. As a result of your program participation, to what extent did you do each of the following within your work organization?

| | To a great extent | To a moderate extent | To a small extent | Not at all | Too early to tell / NA |
|--|-----------------------|-----------------------|-----------------------|-----------------------|------------------------|
| Shared knowledge with others in my organization. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Shared materials/resources with others in my organization. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Brought material I learned into process/policy revision. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

| | | | | | |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Improved program compliance. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|

Q18. Considering your experience with the GBSC program, how have you applied what you learned to your work within your organization, if at all? Please provide one or two specific examples as relevant.

Q19. What impact has your experience with GBSC program had since you began participating in this program? This impact could be at any level: on organizations, communities, families, children, etc.

Q20. I was satisfied with the overall quality of this program.

- Strongly agree
- Agree
- Disagree
- Strongly disagree

[Q21 will only be displayed if respondent indicates that they either disagree or strongly disagree in Q20]

Q21. What about the program detracted from your satisfaction?

Q22. Based on your own experience, please give one or two examples of what you found most valuable about the program. Feel free to comment on program content, format, or other opportunities provided.

Q23. What suggestions do you have, if any, for improving the program?
