

### **INTRODUCTION**

The purpose of this survey is to collect the opinions of FBI-sponsored course participants regarding their experience in the Department of Homeland Security's ICS/SCADA course. Please answer each question candidly, and be specific. We encourage you to take the time to write comments as they provide us with extremely valuable feedback.

All responses are anonymous, and results will be reported as group data. This survey will remain open for two weeks. You will have ONE attempt to open and complete this survey. Your participation should take less than 10 minutes.

The survey contains this introduction plus two sections of questions. As you complete each section, click "Submit" at the bottom of the page to proceed to the next section. At the end of the last section, select "Submit" to complete your survey.

Thank you for your participation.

#### **SECTION 1 of 2: ASSESSMENT OF COURSE INSTRUCTION**

### Except where noted, each of the questions will use a Likert scale of:

Strongly Disagree - Disagree - Neutral - Agree - Strongly Agree - Not Applicable

#### Feedback on Course:

- 1. The content covered in this course matched what I expected to learn when I registered.
- 2. The content was appropriate for an introductory-level course.
- 3. It was clear how each lesson fit into the course as a whole.
- The course included sufficient real-life examples, situations, cases, etc. to facilitate my understanding of course content.
- 5. I found this course engaging and interactive.
- 6. The course provided sufficient opportunity to practice the skills learned in this course.
- 7. The length of this course was appropriate for the content taught. [uses the following Likert Scale: Much Too Long Too Long Just Right Too Short Much Too Short]
- 8. How would you rate the overall effectiveness of this course? [uses the following Likert Scale: Unacceptable Not Satisfied Satisfied Very Satisfied Excellent]
- 9. What knowledge and/or skills acquired in this course will you be able to use on the job? [open-ended question]
- 10. Do you anticipate any obstacles when trying to implement what you learned in this course? [yes/no with comment box]
- 11. Which aspects of this course were the MOST valuable to your overall learning experience? [open-ended question]
- 12. Which aspects of this course were the LEAST valuable to your overall learning experience? [open-ended question]

General Comments regarding the content of this course: [open-ended question]

# **Feedback on Practical Exercise**

- 1. Classroom instruction prepared me to successfully participate in the practical exercise.
- 2. The practical exercise was set up in a realistic way.
- 3. The criteria for evaluating my performance in the practical exercise were clear prior to the exercise.
- 4. What comments and/or suggestions do you have for improving the practical exercise? [open-ended question]

#### Feedback on Instructor:

- 1. The instructor presented the course material in an organized manner.
- 2. The instructor spoke clearly and audibly.
- 3. The instructor knew the subject matter thoroughly.
- 4. The instructor covers material at an appropriate pace.
- 5. The instructor provided adequate opportunities for class discussion.
- 6. The instructor effectively facilitated class participation.
- 7. The instructor provided context which enabled me to understand how the lesson material applies to my job role.
- 8. The instructor captured my interest in the subject matter.
- 9. I received sufficient feedback on my class performance to help improve my learning.
- 10. General Comments regarding this instructor: [open-ended question]

## Feedback on Facilities:

- 1. The class environment helped me to learn. [yes/no with comment box]
- 2. Room accommodations met my expectations. [yes/no with comment box]
- 3. Transportation was adequate and convenient. [yes/no with comment box]
- 4. Classroom technology worked as needed. [yes/no with comment box]

#### **SECTION 2 of 2: DEMOGRAPHIC INFORMATION**

#### 1. Field Office/Division:

*Drop Down Question Format with:* 

Albany Houston Oklahoma City

Albuquerque **Human Resources Division** Omaha

Anchorage Indianapolis Operational Technology Division

Atlanta Information and Technology Branch Philadelphia Phoenix Baltimore Inspection Division

Birmingham **International Operations Division** Pittsburgh Boston **Iackson** Portland

Buffalo Records Management Division Jacksonville

Charlotte **Kansas City** Richmond Chicago Knoxville Sacramento Cincinnati Laboratory Division Saint Louis Las Vegas Cleveland Salt Lake City Columbia Little Rock San Antonio Counterintelligence Division Los Angeles San Diego Counterterrorism Division Louisville San Francisco Criminal Investigative Division Memphis San Juan Critical Incident Response Group Miami Seattle

Cyber Division Security Division Milwaukee Dallas Minneapolis Springfield Denver Mobile Tampa

Training Division Detroit New Haven Directorate of Intelligence **New Orleans** Washington Field

Weapons of Mass Destruction Directorate El Paso New York City

Finance and Facilities Division Newark Honolulu Norfolk

Please type your location if not listed.

# 2. Job Title:

Drop Down Question Format with:

Senior Executive Service **General Attorney Staff Operations Specialist** 

Assistant Legal Attaché Information Technology Specialist Assistant Special Agent in Charge Information Technology Specialist - FE

**Assistant Section Chief Intelligence Analyst** 

**Computer Scientist** Legal Attaché CyD Fellow Management and Program Analyst

Detailee to the FBI **Operational Support Technician** 

Special Agent

Supervisory Intelligence Analyst Supervisory Special Agent

Task Force Officer

**Unit Chief** 

Other

If Other.	please	provide y	our i	ob title.
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3.	Or	perationa	l Assig	nment:
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Radio Button Question Format with:
Counterintelligence
Counterterrorism
Criminal Investigation
Cyber
Intelligence
Science and Technology
Other

If Other, please provide your operational assignment.

4. I attended this course because:

Radio Button Question Format with:

- a. Prerequisite for another class
- b. Operational need
- c. Part of OJT program
- d. Interesting subject matter
- e. Location
- f. Other

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1	f Other, please explain.		
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- 5. Have you taken any of the following courses? (Check all that apply.)
- O CYB 2000 Computer Intrusion Basic
- O CYB 2500 Cyber Bootcamp
- O CYB 2501 Cyber Investigative Skills Course (CISC) Level 1
- O SANS SEC 301 Introduction to Information Security
- O SANS SEC 401 Security Essentials Bootcamp Style
- O Digital Extraction Technician (DExT) Training
- O Any other CART training
- O A+ Certification
- O Network+ Certification

*If needed by survey distribution method:* 

- 6. Course Number
- 7. Course location
- 8. Date training began: (MM/DD/YYYY)
- 9. Name of Instructor(s)