### **INTRODUCTION**

The purpose of this survey is to collect the opinions of course participants regarding the content presented and the performance of the instructional staff. 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. My previous cyber training prepared me to be successful in this course.
- 3. It was clear how each lesson fit into the course as a whole.
- 4. The course provided sufficient opportunity to practice the skills learned in this course.
- 5. The course included sufficient real-life examples, situations and cases to facilitate my understanding of course content.
- 6. I found this course engaging and interactive.
- 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 Exercise/Lab

- 1. Classroom instruction prepared me to successfully participate in the practical exercises.
- 2. The practical exercises were set up in a realistic way.
- 3. The criteria for evaluating my performance in the practical exercises were clear prior to the exercise.
- 4. What comments and/or suggestions do you have for improving the practical exercises? [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. Related course materials to class needs
- 9. The instructor captured my interest in the subject matter.
- 10. I received sufficient feedback on my class performance to help improve my learning.

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 Albuquerque Anchorage Atlanta Baltimore Birmingham Boston Buffalo Charlotte Chicago Cincinnati Cleveland Columbia **Counterintelligence** Division **Counterterrorism Division Criminal Investigative Division Critical Incident Response Group** Cyber Division Dallas Denver Detroit **Directorate of Intelligence** El Paso Finance and Facilities Division Honolulu

Houston Human Resources Division Indianapolis Information and Technology Branch Inspection Division **International Operations Division** Iackson Jacksonville **Kansas** City Knoxville Laboratory Division Las Vegas Little Rock Los Angeles Louisville Memphis Miami Milwaukee Minneapolis Mobile New Haven New Orleans New York City Newark Norfolk

Oklahoma City Omaha **Operational Technology Division** Philadelphia Phoenix Pittsburgh Portland **Records Management Division** Richmond Sacramento Saint Louis Salt Lake City San Antonio San Diego San Francisco San Juan Seattle Security Division Springfield Tampa Training Division Washington Field Weapons of Mass Destruction Directorate

Please type your location if not listed.

# 2. Job Title:

Drop Down Question Format with: Senior Executive Service Assistant Legal Attaché Assistant Special Agent in Charge Assistant Section Chief Computer Scientist CyD Fellow Detailee to the FBI

General Attorney Information Technology Specialist Information Technology Specialist - FE Intelligence Analyst Legal Attaché Management and Program Analyst Operational Support Technician Staff Operations Specialist Special Agent Supervisory Intelligence Analyst Supervisory Special Agent Task Force Officer Unit Chief Other

If Other, please provide your job title.

3. Operational Assignment:

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

If Other, please explain.

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)