Center for Domestic Preparedness

Anniston, AL 36205



Date:

TO: Supervisor's Name

FROM: Linda S. Pressley Assistant Director of Analysis and Evaluation

SUBJECT: Six month Follow-up Evaluation

The Center for Domestic Preparedness (CDP) is extremely honored that your employee; ______had chosen to participate in our training program. We are constantly assessing the effectiveness of our training and very interested in our audience's assessment of whether the training met the participant's specific needs.

Approximately six months ago, _______ attended a course at the CDP. We are especially pleased that you agreed to participate in our Level 3 evaluation process to determine whether the training met your employee's professional needs and has since been utilized in the conduction of her/his professional duties. The Level 3 evaluation form will be sent directly to you in the next few days. This should only take a few minutes of your time and will be extremely valuable in our efforts of maintaining current and effective training courses.

Thank you again for your participation in this process and we look forward to receiving your comments on the evaluation instrument.