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# National Fire Academy Long-Term Evaluation Form for Students (FEMA Form 078-0-2A)

## Completion Instructions

1. Begin by checking the course dates and title below to make sure this is your course.
2. Use the buttons at the bottom of each page to navigate through the form.
3. DO NOT enter your name in any location on the form so that your evaluation may remain confidential.
4. At any time you may click the **Save and Finish Later** button to save your form and return to it later.

<b>Course Title:</b>	Incident Safety Officer
<b>Course Code:</b>	F0729
<b>Course Dates:</b>	8/22/2020 - 8/23/2020

## Long-Term Student Part I

If you know it, please tell us your FDID#.

How many NFA resident courses have you taken in the course of your career?

How many NFA field courses have you taken in the course of your career?

### How would you describe the primary population served by your department or organization? (Mark all that apply.)

- Rural
- Suburban
- Urban
- County/District
- Parish
- State-wide
- Institutional
- Government
- Other (please specify)

**How would you describe your service organization?**

- Career Fire Service
- Career and Volunteer Fire Service
- Volunteer Fire Service
- Allied Professionals
- Private/Contract
- Other (please specify)

**Please estimate the size of your department.**

- 1 to 25 persons
- 26 to 50 persons
- 51 to 100 persons
- 101 to 200 persons
- 201 to 500 persons
- 501 to 1,000 persons
- 1,001 to 2,000 persons
- Over 2,000 persons

**What percentage are career personnel?**

- None
- 1 to 25%
- 26 to 50%
- 51 to 75%
- 76 to 99%
- All
- Don't Know

**What percentage are volunteer personnel?**

- None
- 1 to 25%
- 26 to 50%
- 51 to 75%
- 76 to 99%
- All
- Don't Know

**How many years have you been in the fire service?**

- Less than 1 year
- 1 to 5 years
- 6 to 10 years
- 11 to 15 years
- 16 to 20 years
- Over 20 years
- Not Applicable

**What is your rank?**

- Sergeant
- Lieutenant
- Captain
- Battalion Chief
- Division Chief
- Deputy Chief
- Bureau Chief
- Assistant Chief
- Chief of Department
- Other (please specify)

- Not Applicable

**Please indicate your present primary responsibility.**

- Command
- Fire Suppression
- EMS
- Hazardous Materials
- Training/Instructor
- Investigation
- Inspection/Enforcement
- Fire Prevention
- Communications
- Data Processing
- Public Education
- Equipment Maintenance
- Administrative Services
- Other (please specify)

**Please indicate your secondary responsibilities. (Mark all that apply.)**

- Command
- Fire Suppression
- EMS
- Hazardous Materials
- Training/Instructor
- Investigation
- Inspection/Enforcement
- Fire Prevention
- Communications
- Data Processing
- Public Education
- Equipment Maintenance
- Administrative Services
- Other (please specify)

**How many years have you held your current responsibilities?**

- Less than 1 year
- 1 to 5 years
- 6 to 10 years
- 11 to 15 years
- 16 to 20 years
- Over 20 years

**What is the highest level of education you have achieved?**

- Less than high school graduation
- High school graduation or equivalency
- Some college
- Associate's degree
- Bachelor's degree
- Graduate degree
- Other (please specify)

- Prefer not to answer

**What is your sex?**

- Male
- Female
- Prefer not to answer

How old were you on your last birthday? (If you prefer not to answer, just leave blank.)

**Do you consider yourself of Hispanic or Latino/Latina ethnicity?**

- Yes
- No
- Prefer not to answer

**What is your race? (Mark as many as apply, or none if you prefer not to answer.)**

- White
- Black or African-American
- Asian
- Native Hawaiian or Pacific Islander
- American Indian or Alaska Native

The **Save and Finish Later** button will allow you to save answers already provided and come back to the form at a later time to complete it (provided the evaluation period hasn't expired).

FEMA Form 078-0-2A (FEB 19, Students) OMB (Office of Management and Budget No. 1660-0039), Expiration: Feb. 28, 2022

### **Paperwork Burden Disclosure Notice**

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### Long-Term Student Part II

**Where did you take this course?**

- At NFA in Maryland
- At a facility in my state
- Other (please specify)

**Why did you take this course? (Mark all that apply.)**

- Supervisor recommended it
- Attendance was required for my next duty or assignment
- For general career advancement
- Desire to broaden my perspective by working with personnel from across the country
- Desire to increase my technical and professional knowledge
- Other (please specify)

**Did you check whether the course was from a source other than the National Fire Academy?**

- Yes
- No (Skip to question 4)

**Did you find it available elsewhere?**

- Yes
- No

**Where else was it available?**

- At a facility in my state
- At a facility in this region but not in my state

Other (please specify)

**Why did you choose to attend the NFA course? (Mark all that apply.)**

- Asked, told to, by my supervisor
- Overall quality of the instruction, materials, etc.
- Expectation that the content would be 'cutting edge'
- Expectation that the teaching methods would be 'cutting edge'
- Desire to interact with peers from around the country
- No cost to me
- Modest cost to my department
- Other (please specify)

**Have you used any of the training or information from this course on the job since returning to your department?**

- Yes
- No

**Now indicate your level of agreement or disagreement with each statement by selecting the appropriate value.**

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
What I learned from this course helped me do my job better.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This course has contributed to my professional development.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My supervisor is aware of how this course has improved my job performance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This training has helped the department address fire-related problems in our community's high risk areas.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This NFA training has led to reductions in the fire-related risks in the community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This course has made me more safety conscious in my work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prevention ideas from the course have been incorporated into the public education efforts of my department.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This NFA training has improved the performance of my department.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This training has helped my department be better prepared to respond to an "all hazards" or terrorist event(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Did you leave this training expecting to develop new policies or procedures for your department?**

Yes

No

**Did you actually develop them?**

Yes

No

**Were these policies or procedures implemented?**

Yes

No

**Have these policies or procedures improved the performance of your department?**

Yes, they definitely have.

Yes, but only moderately

I'm not sure.

No, they have not.

**Why Not? (Mark all that apply.)**

Too different from current policies and procedures

Budget limitations

Political considerations

Legal, regulatory or union contract considerations

It's no longer part of my responsibilities

Other (please specify)

**Have you shared the information you learned at the training with colleagues in the department?**

Yes

No

**How did you do it? (Mark all that apply.)**

Informally, one-on-one

Informally, but in a group setting

Formally in a training session

Other (please specify)

**Have those colleagues changed their job performance because of this information?**



- Yes
- No
- Don't Know

**Would you recommend this course to others in your department?**

- Definitely yes
- Probably
- Unsure
- Probably not
- Definitely not

**Have you attended other (non-NFA) courses for fire service personnel in the last three years?**

- Yes
- No

**Where was the training delivered? (Mark all that apply.)**

- At a facility in my state
- At a regional facility, but not in my state
- Other (please specify)

**Who sponsored this training? (Mark all that apply.)**

- A national professional association
- A state fire service agency
- A county fire service agency
- A state professional association
- A technical or community college
- Other (please specify)

**Overall, how would you compare your NFA training with the other training you noted above? Regarding the training, would you say..**

- The NFA training was more useful
- Both training experiences were equally useful
- The other training experience was more useful

**Regarding the curriculum materials, would you say...**

- The NFA curriculum was more useful
- Both curricula were equally useful

The other curriculum materials were more useful

Please describe an incident or circumstance in which you applied your training from this NFA offering.

*Please do not enter more than 5000 characters.*

If you could change one thing to improve this training course, what would it be?

*Please do not enter more than 5000 characters.*

What do you think are the new, emerging issues in the fire service field that should be the topics for future NFA training classes?

*Please do not enter more than 5000 characters.*

Finally, please add any comments you may have.

*Please do not enter more than 5000 characters.*

[Save and Finish Later](#)   [Back](#)   [Review Evaluation](#)

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