



## Uniform Crime Reporting (UCR) Training Feedback

This survey is issued by the U.S. Department of Justice, Federal Bureau of Investigation, CJIS Division

### Attendee Feedback

**Please enter the following info about your session:**

UCR Training

Date



**Please rate your satisfaction with:**

	Very Satisfied	Satisfied	Neither Satisfied Nor Dissatisfied	Dissatisfied	Very Dissatisfied
Registering for the course	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accessing the class on the course date	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The overall technical quality of the course	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Please rate the following:**

	Excellent	Very Good	Good	Fair	Poor
The presenter's knowledge, preparedness, and communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The amount of information presented	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Excellent

Very Good

Good

Fair

Poor

The overall value of the course

**What part of the course did you find most useful?**

**What aspects of the course could be improved?**

**How relevant is the material to your role?**

Extremely relevant

Not so relevant

Very relevant

Not at all relevant

Somewhat relevant

**Which of the following best describes your primary role within your agency?**

Sworn Officer

Support Staff

State Program Employee

Other (please specify)

**How likely is it that you would recommend the training to a friend or colleague?**

Not at all likely

Extremely likely

0	1	2	3	4	5	6	7	8	9	10
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**Privacy Act Statement**

**Authority:** The collection of this information is authorized under Title 34 U.S.C. § 10211, 44 U.S.C. § 3101, and the general

record keeping provision of the Administrative Procedures Act (5 U.S.C. § 301). Completing the survey is voluntary.

**Principal Purpose:** The purpose of this survey is to gather feedback regarding your experience with the UCR training session.

**Routine Uses:** All surveys will be maintained in accordance with the Privacy Act of 1974. Information on the form may be disclosed with your consent, and may be disclosed without your consent as permitted by all applicable routine uses as published in the Federal Register (FR), including the routine uses for the FBI Online Collaboration Systems (JUSTICE/FBI-004), published at 82 FR 57291 (Dec. 4, 2017), and the routine uses for The FBI Central Records System (JUSTICE/FBI-002), published at 63 FR 8659, 671 (Feb. 20, 1998) and amended at 66 FR 8425 (Jan. 31, 2001), 66 FR 17200 (Mar. 29, 2001), and 82 FR 24147 (May 25, 2017). Routine uses may include sharing information with other local, state, tribal, territorial, or federal law enforcement agencies.

Pursuant to Paperwork Reduction Act requirements, this collection has been assigned the following control number by the Office of Management and Budget (OMB): 1103-0117. This OMB control number expires 12/31/2022.

SurveyMonkey is not a government website and is controlled and operated by a third party. By completing this survey, you may be providing non-government third parties access to the information provided in the survey. The Department of Justice and the FBI website privacy policies do not apply to SurveyMonkey's platform. SurveyMonkey's privacy policy is available at: <https://www.surveymonkey.com/mp/legal/privacy/>. For more information about the Department of Justice and its privacy policy, please visit: <https://www.justice.gov/> and <https://www.justice.gov/doj/privacy-policy>. For more information about the FBI and its privacy policy, please visit: <https://www.fbi.gov/> and <https://www.fbi.gov/privacy-policy>.

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