

Cybersecurity and Infrastructure Security Agency (CISA)

eLearning Course Feedback Form

OMB Control Number: 1670-0027 OMB Expiration Date: 5/23/2024

PRA Burden Statement: The public reporting burden to complete this information collection is estimated at 2 minutes per response, including the time completing and reviewing the collected information. The collection of this information is voluntary. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number and expiration date. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to DHS/CISA. Mail Stop 0608, 245 Murray Lane SW, Arlington, VA 20598. ATTN: PRA [1670-0027].

Please respond to the statements below by selecting the appropriate level of agreement with the statement.

Instructional Methods and Materials

| Feedback Statement | Strongly Agree | Agree | Neither Agree or Disagree | Disagree | Strongly Disagree |
|---|-------------------|-------|---------------------------------|----------|----------------------|
| Instructional materials were well organized | | | | | |
| and moved logically from one point to the | | | | | |
| next. | | | | | |
| Instructional materials were free of typos, | | | | | |
| spelling, grammar, and usage errors. | | | | | |
| The visual design of instructional materials | | | | | |
| enhanced my learning experience. | | | | | |
| Instructional materials directly supported | | | | | |
| objective accomplishment. | | | | | |
| The content was appropriately supported by | | | | | |
| examples, graphs, tables, photos, and | | | | | |
| documented references that added to my | | | | | |
| comprehension and understanding. | | | | | |
| Instructional methods used were appropriate | | | | | |
| to the subject matter. | | | | | |
| The delivery of course material (e.g., self- | | | | | |
| study, classroom instruction, exercises) was an | | | | | |
| effective way to present this training. | | | | | |
| The course did not promote a product or | | | | | |
| exhibit a commercial bias. | | | | | |

Course Relevance

| Feedback Statement | Strongly Agree | Agree | Neither Agree or Disagree | Disagree | Strongly Disagree |
|--------------------|-------------------|-------|---------------------------------|----------|----------------------|
| | | | Disagree | | |



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| Training objectives were consistent with my | | | |
|---|--|--|--|
| learning needs. | | | |
| Training length was appropriate to accomplish | | | |
| the objectives and my learning needs. | | | |
| I clearly understood the objectives of the | | | |
| training. | | | |
| This training addressed each learning | | | |
| objective. | | | |
| The training was offered when I needed it. | | | |

Your Preparedness

| Feedback Statement | Strongly Agree | Agree | Neither Agree or Disagree | Disagree | Strongly Disagree |
|---|-------------------|-------|---------------------------------|----------|----------------------|
| My knowledge and/or skills increased because of the training. | | | | | |
| I can immediately apply the knowledge and skills learned to help me be more effective in my job. | | | | | |
| As a result of the training provided, I am better prepared to execute my role in various work situations for my organization. | | | | | |
| I will encourage my organization to incorporate information I learned though this training. | | | | | |

Your Satisfaction

| Feedback Statement | Strongly Agree | Agree | Neither Agree or Disagree | Disagree | Strongly Disagree |
|---|-------------------|-------|---------------------------------|----------|----------------------|
| Overall, I was satisfied with the training. | | | | | |
| Based upon my experience, I would | | | | | |
| recommend this training to colleagues and | | | | | |
| other relevant professionals. | | | | | |

Student Services

| Feedback Statement | Strongly | Agree | Neither | Disagree | Strongly |
|--------------------|----------|-------|----------|----------|----------|
| | Agree | | Agree or | | Disagree |



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| | | Disagree | |
|---|--|----------|--|
| Training registration was simple and efficient. | | | |
| Customer Service support was adequate, and | | | |
| my questions were answered effectively. | | | |
| Receiving continuing education units for this | | | |
| course is important to me. | | | |

Quality of Training (Rate the level of training materials for each lesson, where 1 is the lowest score and 5 is the highest score)

| | Training Materials | | | | |
|----------------|--------------------|---|---|---|---|
| Lesson | 1 | 2 | 3 | 4 | 5 |
| Lesson 1 title | | | | | |
| Lesson 2 title | | | | | |
| Lesson 3 title | | | | | |
| Lesson 4 title | | | | | |
| Lesson 5 title | | | | | |
| Lesson 6 title | | | | | |

What would you recommend to improve this training?

Do you have additional comments you would like to share on this training?