ECCR Training Participant Evaluation Survey

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The U.S. Environmental Protection Agency, Conflict Prevention and Resolution Center (CPRC) requests your assistance in evaluating this training session. As a part of this evaluation, we ask participants who have partaken in this training session to provide us with information about their experience. The data compiled will be used to improve future training services provided by the CPRC.

The CPRC will not report information from this evaluation in a way that respondents or their organizations can be identified.

[Note: Green text is meant for in-person and blue for virtual]

**Section 1: Agreement Reactions**

1. **[required question] Please select the type of training you attended:**
	1. In-person training
	2. Virtual training

**In-person reaction section (asked if Q1 = “In-person”]**

1. **[if Q1 = in person] Tell us about the facility and the materials used for the training. Using the scale provided, please rate your agreement with the following items:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **Somewhat agree** | **Neither agree nor disagree** | **Somewhat disagree** | **Disagree** | **Strongly disagree** | **NA** |
| The facility was conducive to effective training. |  |  |  |  |  |  |  |  |
| The materials were understandable. |  |  |  |  |  |  |  |  |
| The handouts were valuable. |  |  |  |  |  |  |  |  |
| I see myself using the materials/handouts in the future as reference. |  |  |  |  |  |  |  |  |
| The slides used in this course contributed to my understanding.  |  |  |  |  |  |  |  |  |
| The handouts were a valuable supplement to the training. |  |  |  |  |  |  |  |  |

1. **[if Q1 = in person] Were there aspects of the training facility that were particularly good or particularly problematic? If so, please describe.**

{Open-ended text box}

1. **[If Q1 = in person] Were there aspects of the materials used that were particularly good or particularly problematic? If so, please describe.**

{Open-ended text box}

1. **[if Q1 = in person] Did you encounter any issues with accessibility of the training (e.g., ability to access facility, necessary accommodations)?**
	1. Yes
	2. No

If so, please describe.

{Open-ended text box}

**Virtual reaction section [only asked if Q1 = “Virtual”]**

1. **[If Q1 = virtual] Tell us about the virtual platform and the materials used for the training. Using the scale provided, please rate your agreement with the following items:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **Somewhat agree** | **Neither agree nor disagree** | **Somewhat disagree** | **Disagree** | **Strongly disagree** | **NA** |
| The virtual platform was conducive for effective training. |  |  |  |  |  |  |  |  |
| I was able to easily access the virtual training platform.  |  |  |  |  |  |  |  |  |
| The materials were understandable. |  |  |  |  |  |  |  |  |
| The handouts were valuable. |  |  |  |  |  |  |  |  |
| I see myself using the materials/handouts in the future as reference. |  |  |  |  |  |  |  |  |
| The slides used in this course contributed to my understanding.  |  |  |  |  |  |  |  |  |
| The handouts were a valuable supplement to the training. |  |  |  |  |  |  |  |  |

1. **[If Q1 = virtual] Were there aspects of the virtual platform that were particularly good or particularly problematic? If so, please describe.**

{Open-ended text box}

1. **[If Q1 = virtual] Were there aspects of the materials used that were particularly good or particularly problematic? If so, please describe.**

{Open-ended text box}

1. **[If Q1 = virtual] Did you encounter any issues with the accessibility of the training (e.g., sizes/readability of fonts, seeing all visual elements, audio)?
Yes / No
If so, please describe.**

{Open-ended text box}

1. **[Would appear if they enter ”yes” to Q5 or Q9] Since you indicated that you had some issues with accessibility, would you like to discuss those issues with someone? If so, please provide an email below.**

{Open-ended box}

1. **Tell us about your training instructor. Using the scale provided, please rate your agreement with the following items:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **Somewhat agree** | **Neither agree nor disagree** | **Somewhat disagree** | **Disagree** | **Strongly disagree** | **NA** |
| The instructor(s) was/were knowledgeable about the topics discussed. |  |  |  |  |  |  |  |  |
| The instructor (s)’s presentation of materials was effective. |  |  |  |  |  |  |  |  |
| The instructor (s) answered questions and encouraged participant contributions. |  |  |  |  |  |  |  |  |

1. **What were the instructor(s)’s strengths?**

{Open-ended text box}

1. **What could the instructor(s) improve?**

{Open-ended text box}

# Section 2: Prospective Learning and Behavior

In the next set of questions, we would like you to reflect on the benefits and value of the training session.

1. **Tell us about what you learned and how you will use what you learned. Using the scale provided, please rate your agreement with the following items:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **Somewhat agree** | **Neither agree nor disagree** | **Somewhat disagree** | **Disagree** | **Strongly disagree** | **NA** |
| The training included adequate opportunities to practice new skills and apply concepts. |  |  |  |  |  |  |  |  |
| I learned something new. |  |  |  |  |  |  |  |  |
| I learned something that will improve my job performance.  |  |  |  |  |  |  |  |  |
| I will use what I learned in the next six months. |  |  |  |  |  |  |  |  |

1. **What were the most important things you learned?**

{Open-ended text box}

# Section 3: Reasons

1. **What were your reasons for taking this training? (Please select all that apply)**

\_\_\_ Training was required

\_\_\_ Training helped me meet continuing education requirements

\_\_\_ Thought it was directly applicable to my work

\_\_\_ Fit my schedule

\_\_\_ Asked or strongly suggested to take the training

\_\_\_ Interest in the topic

\_\_\_ Recommendation from colleague(s)

\_\_\_ Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Section 4: Overall Assessment

1. **Tell us about your overall impressions of the training. Using the scale provided, please rate your agreement with the following items:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **Somewhat agree** | **Neither agree nor disagree** | **Somewhat disagree** | **Disagree** | **Strongly disagree** | **NA** |
| The training was an effective use of my time. |  |  |  |  |  |  |  |  |
| I would recommend this training to my colleagues. |  |  |  |  |  |  |  |  |

1. **Overall, how satisfied are you with the training you received?**

\_\_ Very satisfied

\_\_ Somewhat satisfied

\_\_ Somewhat dissatisfied

\_\_ Very dissatisfied

1. **Do you have any suggestions for improving this training you’d like to share?**

{Open-ended text box}

1. **Are there other training topics you would like to see CPRC offer?**

{Open-ended text box}

**Thank you for taking the time to complete this questionnaire!**

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CONFLICT PREVENTION AND RESOLUTION CENTER

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