**Water Quality Standards Academy**

**Evaluation Form**

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Please select one answer for each category and provide reasons for your ratings.

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| **Module** | **Speaker** | **The presentation effectively conveys the information** | **The delivery was clear and engaging** | **Please provide any additional comments** |
| Introduction/Expectations | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Overview of the WQS Program | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Waters of the U.S. | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Designated Uses | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |

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| Designated Use Revisions | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Introduction to Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Recreational Water Quality Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Human Health Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Group Exercise 1: Human Health Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |

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| Aquatic Life Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Group Exercise 2: Aquatice Life Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Biological Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Site Specific Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Nutrient Criteria | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Antidegradation | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |

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| WQS for Tribal Waters | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| NPDES Permits (402) | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Permit Tools with Roots in WQS | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Wetland WQS and Dredge and Fill Permits (404) | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| 401 Certification | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |

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| Building Resilient WQS | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Implementation: Monitoring and Assessment | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Planning and Implementation: Impaired Waters Listing and TMDLs | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| WQS Variances | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |

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| Economic Considerations in WQS | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Group Exercise 3: WQS Variances | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| Tools for Achieving WQS | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |
| WQS Development and Review | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |

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| **Module** | **Speaker** | **The presentation effectively conveys the information** | **The delivery was clear and engaging** | **Please provide any additional comments** |
| Review and Wrap-up | Instructor Name | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree | Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree |  |

Circle just one answer for each question (if applicable).

Y**our affiliation:** State Tribe EPA Region EPA HQ Other Federal Agency Regulated Community

Consultant Academia Environmental Group Prefer not to answer Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Your level of experience with WQS:** | 0 - 6 months | 6 months - 1 year | 1 - 3 years | 3 years or more | Prefer not to answer |

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| **I am satisfied with the training** | Strongly disagree Disagree Neutral Agree Strongly agree |
| **I would recommend this training to others** | Strongly disagree Disagree Neutral Agree Strongly agree |
| **The training room/virtual training met my standards** | Strongly disagree Disagree Neutral Agree Strongly agree |
| **I was satisfied with the hotel accommodations (if applicable)** | Strongly disagree Disagree Neutral Agree Strongly agree |
| **I was satisfied with the virtual session format (if applicable)** | Strongly disagree Disagree Neutral Agree Strongly agree |
| **I was satisfied with the virtual session content (if applicable)** | Strongly disagree Disagree Neutral Agree Strongly agree |

**What do you think you will remember the most about the WQS Academy? Why?**

**Did you feel the Agenda topics were presented in a logical order? Were there certain topics that should have come before others?**

**Were there any topics not covered that you felt should have been covered in this Academy, or any that you felt were unnecessary?**

**Do you have any additional feedback on the virtual session format or agenda (if applicable)?**

**Please provide any other information you think is relevant.**

***Thank you!***