### DEPARTMENT OF HOMELAND SECURITY Transportation Security Administration

#### END OF COURSE LEVEL 1 EVALUATION—INSTRUCTOR-LED CLASSROOM TRAINING FOR STUDENTS WHO ARE NOT TSA EMPLOYEES

**INSTRUCTIONS**: The purpose of this survey is to determine to what extent you were satisfied with your learning experience. Please answer each question candidly, as your feedback will help us to better understand your impression of the course. Your responses are encouraged and will be kept confidential. Using the ratings scale below, submit your completed evaluation as directed.

## NOTE: No PII/SSI is allowed on this survey

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Course Title: Course Date		<b>s):</b> from:			to:				
SA: St	SA: Strongly Agree A: Agree N: Neither agree nor disagree D: Disagree SD: Strongly Disagree N/A: Not Applicable For any item(s) rated Strongly Disagree or Disagree, please explain in Section VII, Comments/Suggestions								
SECT	ION I. Course Evaluation	SA	Α	N	D	SD	N/A		
1.	I understood the learning objectives.								
2.	Course content aligned with learning objectives.								
3.	I was appropriately challenged by the material.								
4.	I was satisfied with the course length.								
5.	I was comfortable with the pace of the lessons.								
6.	The format (classroom, online, reading, etc.) of this training helped me to apply what I learned on the job.								
7.	Overall, I was satisfied with the course.								
SECT	ION II. Training Benefit	SA	Α	N	D	SD	N/A		
1.	This training gave me knowledge or skills that I did not otherwise gain from on-the-job experience.								
2.	Applying the knowledge and skills from this training will make me more effective in leading TSA/DHS mission execution.								
3.	I have the support of my supervisor in applying what I have learned, back on the job.								
4.	I consider this training to have been a worthwhile investment in my professional development.								
SECTI Instru	ION III. Part A. ctor 1 OLC ID:	SA	Α	N	D	SD	N/A		
1.	The instructor demonstrated knowledge of course content.								
2.	The instructor started and ended class sessions on time.								
3.	The instructor encouraged student participation.								
4.	The instructor provided constructive feedback.								
5.	The instructor refrained from inappropriate behaviors/discussions.								

Previous editions of this form are obsolete

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	ION III. Part B. ctor 2 OLC ID:	SA	Α	N	D	SD	N/A
1.	The instructor demonstrated knowledge of course content.						
2.	The instructor started and ended class sessions on time.						
3.	The instructor encouraged student participation.						
4.	The instructor provided constructive feedback.						
	·						
5.	The instructor refrained from inappropriate behaviors/discussions.						
SECT Instru	ION III. Part C. ctor 3 OLC ID:	SA	Α	N	D	SD	N/A
1.	The instructor demonstrated knowledge of course content.						
2.	The instructor started and ended class sessions on time.						
3.	The instructor encouraged student participation.						
4.	The instructor provided constructive feedback.						
5.	The instructor refrained from inappropriate behaviors/discussions.						
	ION III. Part D. ctor 4 OLC ID:	SA	Α	N	D	SD	N/A
1.	The instructor demonstrated knowledge of course content.						
2.	The instructor started and ended class sessions on time.						
3.	The instructor encouraged student participation.						
4.	The instructor provided constructive feedback.						
5.	The instructor refrained from inappropriate behaviors/discussions.						
SECTION III. Part E. Instructor 5 OLC ID:		SA	Α	N	D	SD	N/A
1.	The instructor demonstrated knowledge of course content.						
2.	The instructor started and ended class sessions on time.						
3.	The instructor encouraged student participation.						
4.	The instructor provided constructive feedback.						
5.	The instructor refrained from inappropriate behaviors/discussions.						

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SECT Instru	I <b>ON III.</b> Part F. ctor 6 OLC ID:	SA	Α	N	D	SD	N/A
1.	The instructor demonstrated knowledge of course content.						
2.	The instructor started and ended class sessions on time.						
3.	The instructor encouraged student participation.						
4.	The instructor provided constructive feedback.						
5.	The instructor refrained from inappropriate behaviors/discussions.						
SECT	ION IV. Testing Evaluation	SA	Α	N	D	SD	N/A
1.	I understood the testing instructions.						
2.	Test questions were consistent with course objectives.						
3.	Test questions were clearly written and understandable.						
SECTION V. Facilities Evaluation		SA	Α	N	D	SD	N/A
1.	I was satisfied with the classroom (i.e., set up, lighting, comfort).						
2.	I experienced minimal distractions during the course.						
3.	I was satisfied with the support services (i.e., cafeteria, shuttle service).						
SECT	ION VI. Recommendations	SA	Α	N	D	SD	N/A
1.	I would recommend this training to a colleague at my level.						
1. P	FION VII. Comments/Suggestions lease provide feedback on what you liked <i>most</i> about the course <u>and why.</u> If <u>a</u> ection <i>completely</i> blank.	you have r	no comn	nent, ple	ase lea	ve the	

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1652-0041 Expiration Date: 08/31/2025 END OF COURSE LEVEL 1 EVALUATION—INSTRUCTOR-LED CLASSROOM TRAINING FOR STUDENTS WHO ARE NOT TSA EMPLOYEES

Please provide feedback on what you liked *least* about the course <u>and why</u>. If you have no comment, please leave the section completely blank.

3. What changes, if any, would you suggest to improve the learning experience? If you have no comment, please leave the section *completely* blank.

#### Thank you for your participation!

**PAPERWORK REDUCTION ACT STATEMENT:** Through this voluntary information collection, TSA is gathering information to improve course curriculum and instruction. The public burden for this collection is estimated to be approximately 30 minutes (0.5 hours). An agency may not conduct or sponsor, and persons are not required to respond to a collection of information, unless it displays a valid OMB control number. The OMB control number assigned to this collection is 1652-0041, which expires 08/31/2025. Send comments regarding this burden estimate or collection to: TSA-11, Attention: PRA 1652-0041 TSA End of Course Level 1 Evaluation - Instructor-Led Classroom Training, 6595 Springfield Center Drive, Springfield, VA 20598.

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**OMB** Control Number