

Attachment 1: 2023 Science Ambassador Regional Training Workshop Satisfaction Survey

[Page 1. Introduction]

Thank you for participating in this 2023 CDC Science Ambassador Regional Training Workshop! The information you provide will be used to guide the direction of future Science Ambassador trainings. Your participation is voluntary. You may take this survey anonymously. Information will be treated in a secure manner. Responses will only be presented in aggregate, and no identifying information will be linked to individual responses.

This survey will take approximately **12 minutes** to complete. By continuing to the next page, you have consented to complete this survey. Please contact EWBEval@cdc.gov if you have any questions or problems concerning this survey.

The public reporting burden of this collection of information is estimated to average **12 minutes** per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333 ATTN: PRA (0920-1050).

[Page 2. General Information]

1. Which of the following most influenced you to register for the CDC Science Ambassador Regional Training Workshop? (select up to 3)
 - CDC Science Ambassador website
 - In-person event (e.g., conference booth)
 - News advertising (e.g., online ad, news media)
 - Newsletter or email (e.g., from CDC, your university, professional organization)
 - CDC social media (e.g., Facebook, LinkedIn, Instagram, Twitter, YouTube)
 - Webinar or other virtual event (e.g., information session, alumni panel)
 - Word of mouth (e.g., from current or former fellow, professor, supervisor)
 - Other (please specify): _____
2. Which grade(s) do you currently teach? (Select all that apply)
 - Elementary (K-5)
 - Middle (6-8)
 - High (9-12)
 - Undergraduate
 - Graduate
 - Other: Curriculum Development Specialist *(If selected, skip to Page 4)*
 - Other: Professional Development Provider *(If selected, skip to Page 4)*
 - Other (please specify): _____

[Page 3. General Information]

3. Which subject area(s) do you currently teach? (Select all that apply)
 - Epidemiology or Public Health
 - Core Sciences (e.g., Life Sciences, Physical Sciences, Earth and Space Sciences, Engineering, Technology, and Applications of Science)
 - Health and Medical Sciences
 - Other (please specify): _____
4. Have you ever taught Epidemiology or Public Health?
 - Yes, as a course (e.g., Epidemiology, Public Health)
 - Yes, as a part of another course
 - No
 - Not Sure
5. How many years have you been teaching?
[Drop Down #s 1-29, 30+, Other (please specify): _____]
6. Approximately how many students did you teach or are you teaching during the 2022-2023 school year?
[Open-ended]

[Page 4. General Information]

The following questions are completely voluntary. The Science Ambassador seeks to better understand the schools where our participants teach, including aggregated school demographic characteristics (e.g., socioeconomic status). We will use these data to improve outreach and programming. Responses will only be presented in aggregate, and no identifying information will be linked to individual responses.

7. What is the name of the school(s) where you currently teach or work? [Open-ended]
8. Please select the state of the school(s) where you currently teach or work:
[U.S. State Drop Down Menu + Other (please specify): _____]
9. Please enter the city of the school(s) where you currently teach or work: _____ [Open-ended]
10. In which type of school(s) do you teach or work?
 - Charter
 - Public
 - Private
 - Collegiate
 - No longer a teacher
 - Not Applicable
 - Other (please specify): _____
11. Do any of the schools where you teach or work receive Title I funds?
 - Yes
 - No
 - I am not sure
 - I prefer not to answer
 - Not applicable

[Page 5. Demographic Information]

The following questions are completely voluntary. You may choose to leave these questions blank or select “I prefer not to answer” to move on to the next question. Responses will only be presented in aggregate, and no identifying information will be linked to individual responses.

12. What is your ethnicity? [Multiple Choice]
 - ☐ Hispanic or Latino
 - ☐ Not Hispanic or Latino
13. What is your race? Select all that apply. [Checkboxes]
 - ☐ American Indian or Alaska Native
 - ☐ Asian or Asian American
 - ☐ Black or African American
 - ☐ Native Hawaiian or Other Pacific Islander
 - ☐ White
 - ☐ I prefer not to answer

14. What sex were you assigned at birth, on your original birth certificate?

- ☐ Male
- ☐ Female
- ☐ I prefer not to answer

15. Do you currently describe yourself as male, female, or transgender?

- ☐ Male
- ☐ Female
- ☐ Transgender Male
- ☐ Transgender Female
- ☐ I prefer not to answer

[Page 6. Session Feedback]

16. Please indicate your level of agreement with each of the following:

"The _____ session was valuable to my learning or professional development."	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	I did not attend.
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0
[SESSION NAME/TIME/INSTRUCTOR]	0	0	0	0	0	0

17. Which session(s) were the most valuable to your learning or professional development? [Open-ended]

18. Overall, what is your opinion of the balance of lecture and interactivity in the workshop?

- ☐ Too much lecture and not enough interactive learning
- ☐ Right amount of both lecture and interactive learning
- ☐ Too much interactive learning and not enough lecture

[Page 7. Overall Feedback]

19. Rate your knowledge in **incorporating public health content into your classroom** to fulfill state teaching standards or other learning goals...

Before the workshop	After the workshop
☐ Not at all knowledgeable	☐ Not at all knowledgeable
☐ Slightly knowledgeable	☐ Slightly knowledgeable
☐ Moderately knowledgeable	☐ Moderately knowledgeable
☐ Very knowledgeable	☐ Very knowledgeable
☐ Extremely knowledgeable	☐ Extremely knowledgeable

20. Please indicate your level of agreement with the following statements:

Participation in the Science Ambassador Regional Training Workshop...	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	Not Applicable
...allowed me to network with other teachers in a meaningful way.	0	0	0	0	0	0
...gave me opportunities to collaboratively lesson plan with other teachers.	0	0	0	0	0	0
...improved my knowledge of how to incorporate public health content into my classroom.	0	0	0	0	0	0
...improved my skills in how to incorporate public health content into my classroom.	0	0	0	0	0	0
...increased my motivation to incorporate public health content into my classroom.	0	0	0	0	0	0
...increased my confidence to incorporate public health content into my classroom.	0	0	0	0	0	0
...has motivated me to pursue additional public health training or professional development opportunities to learn more about classroom implementation.	0	0	0	0	0	0

21. Will you apply what you learned in this workshop in your teaching?

- ☐ Definitely not (*skip to Page 8*)
- ☐ Probably not (*skip to Page 8*)
- ☐ Possibly (*skip to Page 8*)
- ☐ Probably yes (*skip to Page 9*)
- ☐ Definitely yes (*skip to Page 9*)
- ☐ Not applicable — I did not learn anything new from this workshop (*skip to Page 9*)

[Page 8. Overall Feedback: Barriers]

22. What will keep you from using the content of this course in your work? [Open-ended]

[Page 9. Overall Feedback]

23. What suggestions do you have to improve the overall Science Ambassador Regional Training Workshop? [Open-ended]

24. Will you use the NERD Academy curriculum in your classroom?

- ☐ Yes
- ☐ Maybe
- ☐ No (please describe why not)

[Page 10. Overall Feedback]

25. Do you plan to apply to the CDC Science Ambassador Fellowship?
- ☐ Yes, I plan to or already have applied.
 - ☐ Yes, I plan to apply in the future.
 - ☐ No, while I would like to, it would be difficult to make the time commitment.
 - ☐ No, I plan to seek out a range of other professional development opportunities instead.
 - ☐ Not sure, I would need more information about the CDC Science Ambassador Fellowship to make a decision.
 - ☐ None of the above
26. How can the CDC Science Ambassador program improve its programming (e.g., Science Ambassador Regional Training Workshops) and resources (e.g., NERD Academy) to teachers and educational leaders? [Open-ended]

[Confirmation] Thank you for taking the time to complete this survey. We will use this information to make improvements to our programming and resources. If you have questions or concerns about this survey, please contact us at EWBEval@cdc.gov.