

## Attachment 2: 2023 Science Ambassador Regional Training Workshop Satisfaction Survey Screenshots



### 2023 Science Ambassador Regional Training Workshop Satisfaction Survey

#### Introduction

Form Approved  
OMB No. 0920-1050  
Expiration Date: 06/30/2026

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 [FWBEval@cdc.gov](mailto:FWBEval@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).

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## 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
- ☐ Other: Professional Development Provider
- ☐ Other (please specify)

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## 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?

\* 6. Approximately how many students did you teach or are you teaching during the 2022–2023 school year?

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## 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 current teach or work?

8. Please select the state of the school(s) where you currently teach or work.

If you selected "Other" above, please specify):

9. Please enter the city of the school(s) where you currently teach or work.

10. In which type of school(s) do you teach or work? (Select all that apply)

☐ Charter

☐ Collegiate

☐ Public

☐ No longer a teacher

☐ Private

☐ Not Applicable

☐ Other (please specify)

11. Do any of the schools where you teach or work receive Title I funds?

☐ Yes

☐ I prefer not to answer

☐ No

☐ Not applicable

☐ I am not sure

## 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?

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino
- ☐ I prefer not to answer

### 13. What is your race? Select all that apply.

- ☐ 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
- ☐ Other (please specify)

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

- ☐ Male
- ☐ Female
- ☐ Refused
- ☐ I don't know
- ☐ I prefer not to answer

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

- ☐ Male
- ☐ Female
- ☐ Transgender
- ☐ None of these
- ☐ I prefer not to answer

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Satisfaction and 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] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| [SESSION NAME/TIME/INSTRUCTOR] | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

17. Which session(s) were the most valuable to your learning or professional development?

\* 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

## Overall Feedback

### \* 19. Rate your knowledge in...

|                                                                                                                         | Before the workshop  | After the workshop   |
|-------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|
| ...incorporating public health content into your classroom to fulfill state teaching standards or other learning goals: | <input type="text"/> | <input type="text"/> |

### \* 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.                                                                                       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ...gave me opportunities to collaboratively lesson plan with other teachers.                                                                            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ...improved my knowledge of how to incorporate public health content into my classroom.                                                                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ...improved my skills in how to incorporate public health content into my classroom.                                                                    | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ...increased my motivation to incorporate public health content into my classroom.                                                                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ...increased my confidence to incorporate public health content into my classroom.                                                                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| ...has motivated me to pursue additional public health training or professional development opportunities to learn more about classroom implementation. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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

- ☐ Definitely not
- ☐ Probably not
- ☐ Possibly
- ☐ Probably yes
- ☐ Definitely yes
- ☐ Not applicable - I did not learn anything new from this workshop

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## Overall Feedback: Barriers

22. What will keep you from using the content of this course in your work?

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## Overall Feedback

23. What suggestions do you have to improve the overall Science Ambassador Regional Training Workshop?

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

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

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## Overall Feedback

\* 25. Do you plan to apply to the CDC Science Ambassador Fellowship?

- ☐ Yes, I plan to or have already 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?

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Done

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](mailto:EWBEval@cdc.gov).

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