**Attachment 1: 2024 Science Ambassador Regional Training Workshop Satisfaction Survey**

**[Page 1. Introduction]**

Thank you for participating in this 2024 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 13 minutes to complete. By continuing to the next page, you have consented to complete this survey. Please contact [ELWBEval@cdc.gov](mailto:ELWBEval@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 13 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 H21-8, Atlanta, Georgia 30329 ATTN: PRA (0920-1050).

**[Page 2. General information]**

1. How many years have you been teaching?\*

[Whole number]

1. Approximately how many students did you teach or are you teaching during the 2023/2024 school year?\*

[Whole number]

1. 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): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Which subject area(s) do you currently teach?\* Select all that apply.

* Epidemiology or Public Health
* Biology or other Life Sciences
* Core Sciences (e.g., Physical Sciences, Earth and Space Sciences, Engineering, Technology, and Applications of Science)
* Health and Medical Sciences
* Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. 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

**[Page 3. General Information]**

The following questions are completely voluntary. The CDC Science Ambassador program 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.

1. What is the name of the school(s) where you currently teach or work? [Open-ended]
2. Please select the state of the school(s) where you currently teach or work:

[U.S. State Drop Down Menu + Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please enter the city of the school(s) where you currently teach or work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Open-ended]
2. In which type of school(s) do you teach or work? Select all that apply.
   * Charter
   * Public
   * Private
   * Collegiate
   * No longer a teacher
   * Not Applicable
   * Other (please specify):
3. Do any of the schools where you teach or work receive Title I funds?
   * Yes
   * No
   * I am not sure
   * Not applicable

**[Page 4. General information]**

1. Which months are you more likely available to attend a workshop or other professional development event?\* Select all that apply. [Checkboxes]
   * January
   * February
   * March
   * April
   * May
   * June
   * July
   * August
   * September
   * October
   * November
   * December
2. Which days of the week are you most likely available to attend a workshop or professional development event?\* Select all that apply. [Checkboxes]
   * Sunday
   * Monday
   * Tuesday
   * Wednesday
   * Thursday
   * Friday
   * Saturday
3. Which of the following prompted 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)
   * Virtual event (e.g., webinar, information session, alumni panel)
   * CDC social media post (e.g., Facebook, LinkedIn, Instagram, Twitter, YouTube)
   * Advertising (e.g., online ad, news media)
   * Newsletter or general email announcement (e.g., from CDC, professional organization)
   * Word of mouth (e.g., conversation or email from current or former fellow, school administrators)
   * Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. What contributed to you selecting this professional development opportunity over others?\* Select all that apply.
   * I am interested in applied epidemiology and other public health topics
   * I was looking for new content and resources to incorporate into my class(es)
   * I want to share different types of careers in science with my students
   * This training opportunity was offered by CDC
   * The training was local and/or convenient for me
   * The timing of the training worked well with my schedule
   * I was told to attend this training
   * Other (please specify):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Prior to attending, what did you expect to learn in this workshop? [Open response]

**[Page 5. Overall Feedback]**

1. Which session(s) were the most valuable to your learning or professional development? Select up to 3.\* [Check boxes, limit 3 responses]
   * SESSION NAME/TIME/INSTRUCTOR
   * SESSION NAME/TIME/INSTRUCTOR
   * SESSION NAME/TIME/INSTRUCTOR
   * SESSION NAME/TIME/INSTRUCTOR
   * SESSION NAME/TIME/INSTRUCTOR
   * SESSION NAME/TIME/INSTRUCTOR
   * SESSION NAME/TIME/INSTRUCTOR
2. To what extent do you agree with the following statements\*:

| The workshop went into sufficient depth… | **Strongly disagree** | **Disagree** | **Neither agree nor disagree** | **Agree** | **Strongly agree** |
| --- | --- | --- | --- | --- | --- |
| …to explain epidemiology and public health concepts. |  |  |  |  |  |
| …to explain how teachers can bring public health into their classrooms. |  |  |  |  |  |

1. What would you have liked to see more of in this workshop? Select up to 3.\* [Check boxes, limit 3 responses]
   * Lesson plan walkthroughs/how to adapt existing CDC resources to the classroom
   * Panels with community leaders
   * Public health/science lecture for background on public health topics to teach lessons
   * Time to lesson plan with other teachers
   * Sessions on how to write public health lesson plans
   * Sessions on aligning public health content to standards like NGSS
   * Other (please specify):

**[Page 6. Overall Feedback]**

1. Rate your knowledge in **how to effectively** **teach public health content in your classroom** before and after participating in the workshop.\*

|  |  |
| --- | --- |
| **Before the workshop** | **After the workshop** |
| * Not at all knowledgeable * Slightly knowledgeable * Moderately knowledgeable * Very knowledgeable * Extremely knowledgeable | * Not at all knowledgeable * Slightly knowledgeable * Moderately knowledgeable * Very knowledgeable * Extremely knowledgeable |

1. 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** |
| --- | --- | --- | --- | --- | --- | --- |
| …met my professional expectations. |  |  |  |  |  |  |
| …improved my content knowledge of epidemiology and public health topics. |  |  |  |  |  |  |
| …helped me identify classroom activities that are appropriate for my students. |  |  |  |  |  |  |
| …increased my awareness of the various types of public health careers. |  |  |  |  |  |  |
| …provided me with lesson plans and other teaching resources for epidemiology and public health. |  |  |  |  |  |  |
| …helped me identify new strategies or refine my strategy to teaching epidemiology and public health in my classroom. |  |  |  |  |  |  |
| …increased my confidence in my ability to teach epidemiology and public health topics. |  |  |  |  |  |  |
| …provided me with justification on how public health content can fulfill teaching standards and other learning objectives. |  |  |  |  |  |  |
| …helped me to network with other teachers in a meaningful way. |  |  |  |  |  |  |
| …increased my motivation to incorporate epidemiology and public health content into my classroom |  |  |  |  |  |  |
| …has motivated me to apply to the Science Ambassador Fellowship in the future. |  |  |  |  |  |  |

**[Page 7. Overall Feedback]**

1. Will you use what you learned in this workshop in your teaching?\*
   * Not applicable — I did not learn anything new from this workshop
   * Definitely yes
   * Probably yes
   * Possibly
   * Probably not
   * Definitely not
2. What factors will keep you from using what you learned this workshop in your teaching?\* Select all that apply.

* None, I will use what I learned in my teaching
* I need additional training in the subject matter
* I will not have the resources I need in my workplace
* I will not be provided opportunities to use what I learned
* I will not have the time to use what I learned
* My school administrators will not support me in using what I learned
* The information provided is not relevant to my current work
* Other, please specify:

1. In the upcoming academic year, how do you plan to incorporate epidemiology and public health topics into your curriculum?\*
2. I plan to offer a year-long course on Epidemiology or Public Health
3. I plan to offer a semester course on Epidemiology or Public Health
4. I plan to teach one or more units on epidemiology and public health science
5. I plan to incorporate topics from epidemiology and public health science into my existing curriculum
6. I will not, but I plan to in the future
7. I will not, and I don’t plan to in the future
8. I do not currently teach
9. Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. In the upcoming academic year, which resource(s) do you plan on using to teach epidemiology and public health topics? Select all that apply.\*
11. CDC NERD Academy curriculum
12. CDC Science Ambassador Fellowship Educational Activities (Lesson Plans)
13. STEM at CDC website
14. CDC website
15. Non-CDC lesson plans (e.g., Young Epidemiology Scholars Lesson Plans) or websites (e.g., Medical Detectives). Please provide 1–2 examples:
16. None

**[Page 8. Overall Feedback]**

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

**[Page 9. General 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.

1. What is your ethnicity? [Multiple Choice]

* Hispanic or Latino
* Not Hispanic or Latino
* Prefer Not to Answer/Decline

1. What is your race? Select all that apply. [Checkboxes]

* American Indian or Alaska Native
* Asian
* Black or African American
* Native Hawaiian or Other Pacific Islander
* White
* Prefer Not to Answer/Decline

1. How do you currently describe yourself? Select all that apply. [Checkboxes]

* Female
* Male
* Transgender
* I use a different term [free-text]
* Prefer Not to Answer/Decline

**[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 [ELWBEval@cdc.gov](mailto:ELWBEval@cdc.gov).