



## Recommendation for a Short Form Evaluation for Offsite Training

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### Background:

Two standard Agency evaluation forms were approved by the Centers and Disciplines for use in SATERN – one for online training and one for all other training programs (*see attachment*). The NSSC submitted a request to the Agency Training Officer to consider using a shortened version of the evaluation form for offsite training instances. Since this is a proposed change to the approved form the request was submitted via a CCR and brought to the SATERN Governance for approval.

### Recommendation: (OIS-107)

Utilize a shortened version (7 questions) of the Training Evaluation form to capture Level 1 training evaluation feedback from offsite training participants; specifically participants that enroll in classes that utilize the NF-1735 form which is processed by the NSSC. (*Note: There are no proposed changes to the current online evaluation or onsite evaluation in this recommendation*). A prototype of the recommended form can be accessed at the following link:

<https://inquisitesurvey.nssc.nasa.gov/cgi-bin/qwebcorporate.dll?idx=4P9MRF&preview=1>

### Rationale:

- The proposed short form is consistent with the current form in that it utilizes the exact questions (6,14,18,20,21) from the current form and is not creating or suggesting any new or different questions or scales.
- This proposal reduces the form to a core set of questions that are relevant to offsite training. Since this evaluation is used for many types of external training (e.g. academic classes, conferences) some questions on the current form are not always relevant to all situations (e.g. length of program, physical environment).

**Submitted by:** Karen Weaver for Melissa Riesco

(current form)  
**Training Program Evaluation**

Your completion of this questionnaire will help us make improvements to our programs. It will take you approximately 5 minutes to complete the evaluation. Your feedback will remain confidential. Thank you for providing your input.

**Facilitator**

	<b>Strongly Disagree</b>				<b>Strongly Agree</b>
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
1. The facilitators were knowledgeable about the subject.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The facilitators were prepared and organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Participants were encouraged to take part in the discussion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The facilitators sufficiently responded to participants needs/questions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The facilitators' energy and enthusiasm kept the participants engaged.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. On-the-job application of each objective was discussed during the program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Learning Environment**

	<b>Strongly Disagree</b>				<b>Strongly Agree</b>
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
7. The physical environment was conducive to learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The training office support/services were helpful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Please provide detail as to how we can improve the learning environment.					

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(free form learner text input)

## Program Content

	Strongly Disagree	1	2	3	4	Strongly Agree
10. The length of the program was appropriate to cover the content.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. The instructional material was organized logically.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. The examples presented helped me understand the content.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. The participant materials will be useful on the job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. The program content is relevant to my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. The program content is important to my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. I would recommend this program to others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Please provide detail as to how we can improve the program content.						

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(free form learner text input)

## Learning

	Strongly Disagree	1	2	3	4	Strongly Agree
18. I have learned new knowledge/skills from this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I am confident in my ability to apply the knowledge/skills learned from this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(select only one)

20. Rate your skill level of the program content BEFORE attending the program (0% = no knowledge; 100% = expert skills)

☐ 0-20% ☐ 20-40% ☐ 40-60% ☐ 60-80% ☐ 80-100%

21. Rate your skill level of the program content AFTER attending the program (0% = no knowledge; 100% = expert skills)

☐ 0-20% ☐ 20-40% ☐ 40-60% ☐ 60-80% ☐ 80-100%

### Planned Application

	Infrequently				Frequently
	1	2	3	4	5
22. How frequently will you apply the knowledge and skills learned in the program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Low				High
	1	2	3	4	5
23. What will be your level of effectiveness with the knowledge and skills learned in the program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Barriers/Enablers to Application

24. Which of the following barriers will most likely prevent you from applying knowledge/skills learned from the program?

- ☐ Opportunity to use
- ☐ Lack of management support
- ☐ Lack of support from colleagues and peers
- ☐ Insufficient knowledge and understanding
- ☐ Lack of confidence to apply knowledge/skills
- ☐ Systems and processes within the organization will not support application of knowledge and skills.
- ☐ I do not expect barriers to application.

25. Which of the following will most likely enable you to apply knowledge/skills learned from the program?

- ☐ Opportunity to use
- ☐ Management support
- ☐ Support from colleagues and peers
- ☐ Knowledge and understanding
- ☐ Confidence to apply knowledge/skills
- ☐ Systems and processes within the organization will support application of knowledge and skills.

26. Please provide any additional comments as to how we can improve your overall learning experience.

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(free form learner text input)

[NOTE: The date the survey is filled out is recorded by SATERN, but the program title and facilitator names are not actually part of the survey result set. However, because the survey results are stored under the program (item and/or curriculum), there is a link that can be used to pull the information for a particular program and/or its facilitator into a report.]