



VERNON COLLEGE

CONTINUING EDUCATION

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Century City Center: 4105 Maplewood, Wichita Falls, TX 76308 • 940-696-8752, Ext 3213 • FAX: 940-689-3871

Skills Training Center: 2813 Central Expressway East, Wichita Falls, TX 76302 • 940-766-3369 • FAX: 940-766-3419

www.vernoncollege.edu/conted

COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

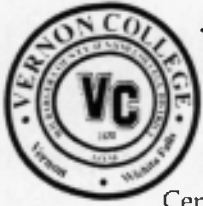
| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:
instructor was very knowledgeable and personable
course was extremely informational. Would
definitely take again

14. How did you hear about this course?
WFPD

15. What other courses would you like Continuing Education to offer?
Excel Workshop for Public Safety

THANK YOU FOR YOUR TIME.



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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | |
|----|---|----------------|-------|-------------------|---|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
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| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

14. How did you hear about this course? NOLTEX

15. What other courses would you like Continuing Education to offer?

Excel

THANK YOU FOR YOUR TIME.



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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | | Agree | | Strongly Disagree | |
|----|---|----------------|---|-------|---|-------------------|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Very knowledgeable

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

Excel

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____ Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | | Agree | | Strongly Disagree | |
|----|---|----------------|---|-------|---|-------------------|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Excellent class! Would been good to have more time to be able to
work with instructor

14. How did you hear about this course?

WFPD

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): Kelly Brewer Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | (2) | 1 N/A |
| 2 | The instruction was suitable for the program/course. | (5) | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | (5) | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | (5) | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | (5) | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | (5) | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | (5) | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | (5) | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | (5) | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor's instructional method, or course content:
Extremely good. I learned a lot. Mr. Manson
made this course worthwhile. I will be
highly recommended.

14. How did you hear about this course?
Supervisor

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | | Agree | | Strongly Disagree | |
|----|---|----------------|---|-------|---|-------------------|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
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| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

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Name (optional): _____

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Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
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| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

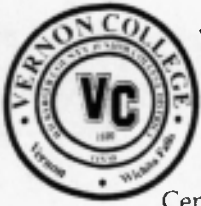
GRATE INSTRUCTOR - KNOWLEDGABLE & FUNNY

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | | |
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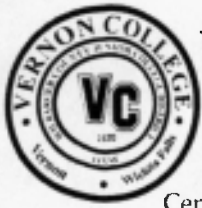
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14. How did you hear about this course?

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | | |
|----|---|----------------|-------|-------------------|---|---|-----|
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| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
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| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

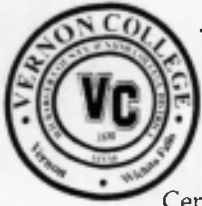
Great class, Great Instructor

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): Scott Poole

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | |
|----|---|----------------|---------|-------------------|--|
| 1 | The length of the course was appropriate for content. | 5 | 4 3 2 1 | N/A | |
| 2 | The instruction was suitable for the program/course. | 5 | 4 3 2 1 | N/A | |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 3 2 1 | N/A | |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 3 2 1 | N/A | |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 3 2 1 | N/A | |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 3 2 1 | N/A | |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 3 2 1 | N/A | |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 3 2 1 | N/A | |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 3 2 1 | N/A | |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 3 2 1 | N/A | |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 3 2 1 | N/A | |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 3 2 1 | N/A | |

13. Comments regarding the instructor(s), instructional method, or course content:

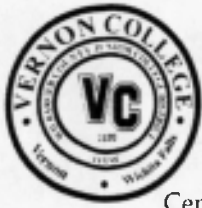
Good Course Need more time maybe 2 more days.

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

N/A

14. How did you hear about this course?

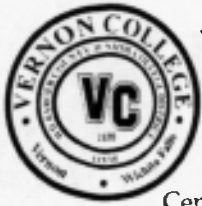
N/A

15. What other courses would you like Continuing Education to offer?

N/A

THANK YOU FOR YOUR TIME.

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www.vernoncollege.edu/conted

COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | | |
|----|---|----------------|-------|-------------------|---|---|-----|
| 1 | The length of the course was appropriate for content. | (5) | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | (5) | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | (5) | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | (5) | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | (5) | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | (5) | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | (5) | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

THE Instructors presentation skills were EXCEPTIONAL!
Awesome Class

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

I ENJOYED THIS COURSE WOULD HAVE LIKED IT TO BE LONGER TO ALLOW MORE HANDS ON W/ SOME ASPECTS

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): Danelle Sheehan Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Awsome! Thomas was an excellent instructor. would recommend this course to others.

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | | Agree | | Strongly Disagree | |
|----|---|----------------|---|-------|---|-------------------|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): Carter Ayers Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | | Agree | | Strongly Disagree | |
|----|---|----------------|---|-------|---|-------------------|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Course and content were excellent along with the instructor. We got a lot of information in the 2-day period. Would love another full day to practice new methods.

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

Excel

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____ Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

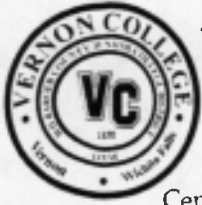
| | | Strongly Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------------------|---------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:
Good Instruction. Only wished had another day.

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.



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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): June H. [Signature]

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | | Agree | | Strongly Disagree | |
|----|---|----------------|---|-------|---|-------------------|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

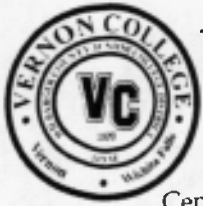
It was way too short but the instructor was the best that I have had for several years

14. How did you hear about this course? WFPD

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | | |
|----|---|----------------|-------|-------------------|---|---|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

more hands on training

14. How did you hear about this course?

Training Staff

15. What other courses would you like Continuing Education to offer?

Excel for Law Enforcement

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | |
|----|---|----------------|-------|-------------------|---|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

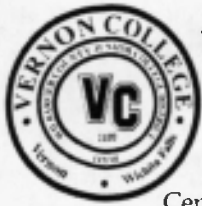
13. Comments regarding the instructor(s), instructional method, or course content:

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Disagree | Strongly Disagree | |
|----|---|----------------|-------|----------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

GREAT PRESENTATION!

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Very good class. Lots of information. Very Entertaining
Helpful.

14. How did you hear about this course?

NORTeX

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | | |
|----|---|----------------|-------|-------------------|---|---|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

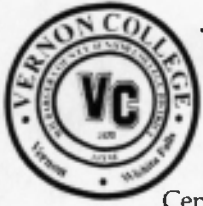
13. Comments regarding the instructor(s), instructional method, or course content:

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

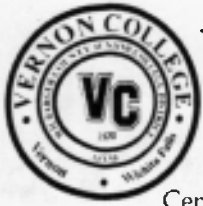
This good course. A must for Instructor

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): Tony Ramirez Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Excellent - Thank you

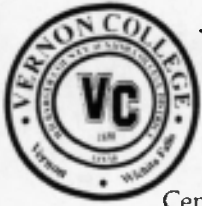
14. How did you hear about this course?

Co-workers

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | |
|----|---|----------------|-------|-------------------|---|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
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| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
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| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Great instructor. This course could have been longer.

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | |
|----|---|----------------|-------|-------------------|---|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
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| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | |
|----|---|----------------|-------|-------------------|---|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

Great instructing abilities!!!

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | | |
|----|---|----------------|-------|-------------------|---|---|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

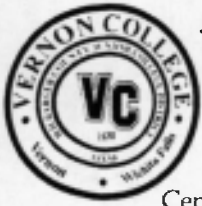
Very good course, valuable to my job assignment

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____ Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Strongly Disagree | | | |
|----|---|----------------|-------|-------------------|---|---|-----|
| 1 | The length of the course was appropriate for content. | (5) | 4 | 3 | 2 | 1 | N/A |
| 2 | The instruction was suitable for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 4 | The equipment used was appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | (5) | 4 | 3 | 2 | 1 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | (5) | 4 | 3 | 2 | 1 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | (5) | 4 | 3 | 2 | 1 | N/A |
| 9 | The program and materials were presented in a timely manner. | (5) | 4 | 3 | 2 | 1 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | (5) | 4 | 3 | 2 | 1 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | (5) | 4 | 3 | 2 | 1 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | (5) | 4 | 3 | 2 | 1 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

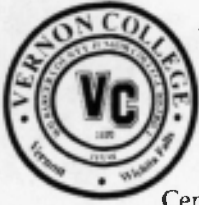
good course

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): Casey Kirkpatrick Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|-------|-------|-------------------|-----|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | 2 | N/A |
| 2 | The instruction was suitable for the program/course. | 5 | 4 | 3 | 2 | N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | 4 | 3 | 2 | N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | 4 | 3 | 2 | N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | 4 | 3 | 2 | N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | 4 | 3 | 2 | N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | 3 | 2 | N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | 4 | 3 | 2 | N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | 3 | 2 | N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | 3 | 2 | N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | 4 | 3 | 2 | N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | 4 | 3 | 2 | N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

The course could easily be much longer to better retain the material. Awesome course!

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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COURSE and INSTRUCTOR EVALUATION

Please circle the number that corresponds to your opinion. Thank you for your response.

Name (optional): _____

Date: 8/22/2013

Course Name/ID # Powerpoint for Public Safety

Instructor(s): Thomas Manson

| | | Strongly Agree | Agree | Agree | Strongly Disagree | |
|----|---|----------------|----------|----------|-------------------|-------|
| 1 | The length of the course was appropriate for content. | 5 | 4 | 3 | <u>2</u> | 1 N/A |
| 2 | The instruction was suitable for the program/course. | <u>5</u> | 4 | 3 | 2 | 1 N/A |
| 3 | The location/facilities were appropriate for the program/course. | 5 | <u>4</u> | 3 | 2 | 1 N/A |
| 4 | The equipment used was appropriate for the program/course. | 5 | <u>4</u> | 3 | 2 | 1 N/A |
| 5 | The materials and course content were appropriate for the program/course. | 5 | <u>4</u> | 3 | 2 | 1 N/A |
| 6 | The instructional methods used were suitable for the program/course. | 5 | <u>4</u> | 3 | 2 | 1 N/A |
| 7 | All of the learning outcomes were met or exceeded for this course/program. | 5 | 4 | <u>3</u> | 2 | 1 N/A |
| 8 | The course/program related closely to my job and will improve my job performance. | 5 | <u>4</u> | 3 | 2 | 1 N/A |
| 9 | The program and materials were presented in a timely manner. | 5 | 4 | <u>3</u> | 2 | 1 N/A |
| 10 | My training needs/goals for this course were met or exceeded. | 5 | 4 | <u>3</u> | 2 | 1 N/A |
| 11 | Overall, I was satisfied with the entire course/program and the instructor. | 5 | <u>4</u> | 3 | 2 | 1 N/A |
| 12 | I would recommend this course to friends and/or business associates. | 5 | <u>4</u> | 3 | 2 | 1 N/A |

13. Comments regarding the instructor(s), instructional method, or course content:

wish the class was longer. Great class

14. How did you hear about this course?

15. What other courses would you like Continuing Education to offer?

THANK YOU FOR YOUR TIME.

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