

# Tribal Mitigation Planning Workshop Evaluation

Which tribe, agency, or organization are you affiliated with?

\_\_\_\_\_

Have you participated in a mitigation planning process before this course?

- a) Yes, I participated in a mitigation planning process before.  
 b) No, but I am aware of the process.  
 c) No, but I know about mitigation from other efforts (like grants).  
 d) I am new to mitigation planning.

If you are currently involved in plan development, where are you in the process?

- a) Writing the first plan  
 b) Updating the plan  
 c) Maintaining the plan  
 d) Considering the development of a plan

Course Ratings: please check the boxes that apply.

Overall:

|   | Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |
|---|-------------------|----------|--------|-------|----------------|
| Course was well organized                         |                   |          |        |       |                |
| Length of course was reasonable                   |                   |          |        |       |                |
| Training session was a valuable use of my time    |                   |          |        |       |                |
| I will be able to apply what I learned in my work |                   |          |        |       |                |

Classroom

|                        | Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |
|------------------------|-------------------|----------|--------|-------|----------------|
| Comfortable            |                   |          |        |       |                |
| Appropriate for course |                   |          |        |       |                |

Printed Materials

|                | Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |
|----------------|-------------------|----------|--------|-------|----------------|
| Well organized |                   |          |        |       |                |
| Complete       |                   |          |        |       |                |
| Readable       |                   |          |        |       |                |



Date: \_\_\_\_\_

Location: \_\_\_\_\_



**Visual Materials**

|                       | Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |
|-----------------------|-------------------|----------|--------|-------|----------------|
| Well organized        |                   |          |        |       |                |
| Good quality          |                   |          |        |       |                |
| Appropriate in number |                   |          |        |       |                |

**Instruction**

|  | Strongly Disagree | Disagree | Unsure | Agree | Strongly Agree |
|--|-------------------|----------|--------|-------|----------------|
| Contributed to my knowledge and understanding of the topic |                   |          |        |       |                |
| Level of detail was appropriate                            |                   |          |        |       |                |
| Length of course was reasonable                            |                   |          |        |       |                |
| Instructor was engaging                                    |                   |          |        |       |                |

Additional suggestions or comments on the course:

Date: \_\_\_\_\_

Location: \_\_\_\_\_