

# CitizenReady® Pandemic Influenza Instructor-Led Training

## Course Evaluation

**5 – Strongly agree, 4 – Agree, 3 – Neutral, 2 – Disagree, 1 – Strongly disagree**

### **Learning Objectives:**

I am confident I can explain the difference between seasonal and pandemic influenza	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
I am confident I can describe actions communities can take to prepare for an influenza pandemic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
I am confident I can describe actions you can take to prepare for an influenza pandemic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
I am confident I can describe public health directives that may be issued in a pandemic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
I am confident I can describe actions you can take to limit the spread of an influenza pandemic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>

### **Overall:**

1. Overall, the course content was appropriate for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
2. Overall, the course format was effective.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
3. The time to complete the course was appropriate. (If too long or too short, please explain at the end of this survey)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
4. Overall, the course met my needs and expectations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
5. After taking this course, I feel better prepared for an influenza pandemic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
6. I am concerned about pandemic influenza and outbreaks of other infectious diseases.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
7. After taking this course, I can better interpret news reports and other media information about pandemic influenza.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
8. I would rate this CitizenReady® training positively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
9. After taking this course, are you more motivated to look into disaster volunteer opportunities in your community?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>

**5 – Advanced, 4 – Intermediate, 3 – Basic, 2 – Little, 1 – None**

10. BEFORE taking this course, my knowledge about pandemic influenza could be rated as:  5  4  3  2  1
11. AFTER taking the course, my knowledge about pandemic Influenza could be rated as:  5  4  3  2  1

12. Do you have any previous formal training or education related to pandemic influenza?  
 Yes  No

**General Comments:**

16. Which part(s) of the course was (were) MOST valuable to you? Please explain why.

17. Which part(s) of the course was(were) LEAST valuable to you ? Please explain why.

18. Please provide any other comments or suggestions you have for improving this course.

19. What other training is most important to you now that you have completed this course?

I agree to be contacted via email for a follow-up survey regarding CitizenReady® training.  
 Yes  No **Email:** \_\_\_\_\_

**Optional:**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**City/State:** \_\_\_\_\_

**Population:**  Less than 10,000  10,000 – 49,000  50,000 – 99,999  100,000 or more

**Gender:**  Female  Male

**Occupation:**  Health-related; Discipline \_\_\_\_\_  Not Health-related

**Age:**  18-24  25-34  35-44  45-54  55-64  Above 65

**Race:**  African American  American Indian/Alaska Native  Asian/Pacific Islander

Hispanic/Latino  White  Other/Choose not to respond

**Thank you for your participation. Your feedback is important to us!**