

Workshop Evaluation: For credit, return all completed evaluations to: marina.goode@deca.mil

Workshop #1: "Financial Management Transformation and ASMC"

Workshop Credit: 1.0 CPE

Presenter Names: Mr. Rich Brady, ASMC Chief Executive Officer

Rate the Program – Please use this scale to indicate the extent to which you agree with the following statements					
1 = Strongly Disagree / 2 = Disagree / 3 = Neither Agree nor Disagree / 4 = Agree / 5 = Strongly Agree					
1. Provide three take-aways from this course that are most applicable to your job. (Mandatory response)					
2. This lesson will improve my ability to perform my job.					
N/A <input type="radio"/>	1 <input type="checkbox"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
3. The information was presented in a logical and clear manner.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
4. The time allotted for the presentation was appropriate.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
5. The audio and visual materials were effective.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
6. I would like to hear from this speaker again in the future. YES <input type="radio"/> NO <input type="radio"/>					
7. Do you have any questions for this speaker? Please enter the details below or select "N/A".					
N/A <input type="radio"/>					
8. Would you like to attend this event next year in person <input type="radio"/> or virtual? <input type="radio"/>					
9. Did you experience any technical difficulties?					
N/A <input type="radio"/>	Yes, I experienced the following difficulties:				
10. Next program year, would you consider assisting in the following areas (select as many as you like)					
N/A <input type="radio"/>	Social Platform <input type="radio"/>	Community Service <input type="radio"/>	Education & Training <input type="radio"/>	Communication <input type="radio"/>	Special Events <input type="radio"/>
11. Provide additional comments or topics you would like to see covered in future workshops.					

Printed Name (for certificate): _____

Signature _____ Date _____

Email address (for certificate): _____

Workshop Evaluation: For credit, return all completed evaluations to: marina.goode@deca.mil

Workshop #2: "Data. The New Currency"
 Workshop Credit: 1.0 CPE
 Presenter Names: Ms. Christine Frey, Director, Overseas Financial Operations
 Resource Management, DeCA

Rate the Program – Please use this scale to indicate the extent to which you agree with the following statements					
1 = Strongly Disagree / 2 = Disagree / 3 = Neither Agree nor Disagree / 4 = Agree / 5 = Strongly Agree					
1. Provide three take-aways from this course that are most applicable to your job. (Mandatory response)					
2. This lesson will improve my ability to perform my job.					
N/A <input type="radio"/>	1 <input checked="" type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
3. The information was presented in a logical and clear manner.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
4. The time allotted for the presentation was appropriate.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
5. The audio and visual materials were effective.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
6. I would like to hear from this speaker again in the future. YES <input type="radio"/> NO <input type="radio"/>					
7. Do you have any questions for this speaker? Please enter the details below or select "N/A".					
N/A <input type="radio"/>					
8. Would you like to attend this event next year in person <input type="radio"/> or virtual? <input type="radio"/>					
9. Did you experience any technical difficulties?					
N/A <input type="radio"/>	Yes, I experienced the following difficulties:				
10. Next program year, would you consider assisting in the following areas (select as many as you like)					
N/A <input type="radio"/>	Social Platform <input type="radio"/>	Community Service <input type="radio"/>	Education & Training <input type="radio"/>	Communication <input type="radio"/>	Special Events <input type="radio"/>
11. Provide additional comments or topics you would like to see covered in future workshops.					

Printed Name (for certificate): _____

Signature _____ Date _____

Email address (for certificate): _____

Workshop Evaluation: For credit, return all completed evaluations to: marina.goode@deca.mil

Workshop #3: "Research Development Test & Evaluation (RDT&E),
Science & Technology (S&T)"

Workshop Credit: 1.0 CPE

Presenter Names: SFC Singh, Senior Budget Manager RDT&E (S&T), Army Futures Command

Rate the Program – Please use this scale to indicate the extent to which you agree with the following statements					
1 = Strongly Disagree / 2 = Disagree / 3 = Neither Agree nor Disagree / 4 = Agree / 5 = Strongly Agree					
1. Provide three take-aways from this course that are most applicable to your job. (Mandatory response)					
2. This lesson will improve my ability to perform my job.					
N/A <input type="radio"/>	1 <input checked="" type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
3. The information was presented in a logical and clear manner.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
4. The time allotted for the presentation was appropriate.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
5. The audio and visual materials were effective.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
6. I would like to hear from this speaker again in the future. YES <input type="radio"/> NO <input type="radio"/>					
7. Do you have any questions for this speaker? Please enter the details below or select "N/A".					
N/A <input type="radio"/>					
8. Would you like to attend this event next year in person <input type="radio"/> or virtual? <input type="radio"/>					
9. Did you experience any technical difficulties?					
N/A <input type="radio"/>	Yes, I experienced the following difficulties:				
10. Next program year, would you consider assisting in the following areas (select as many as you like)					
N/A <input type="radio"/>	Social Platform <input type="radio"/>	Community Service <input type="radio"/>	Education & Training <input type="radio"/>	Communication <input type="radio"/>	Special Events <input type="radio"/>
11. Provide additional comments or topics you would like to see covered in future workshops.					

Printed Name (for certificate): _____

Signature _____ Date _____

Email address (for certificate): _____

Workshop Evaluation: For credit, return all completed evaluations to: marina.goode@deca.mil

Workshop #4: "Navigating Your FM Career"

Workshop Credit: 1.0 CPE

Presenter Names: Ms. Kirstin H. Riesbeck, SES, Director,
Human Capital & Resource Management, OUSDC, Pentagon

Rate the Program – Please use this scale to indicate the extent to which you agree with the following statements

1 = Strongly Disagree / 2 = Disagree / 3 = Neither Agree nor Disagree / 4 = Agree / 5 = Strongly Agree

1. Provide three take-aways from this course that are most applicable to your job. **(Mandatory response)**

2. This lesson will improve my ability to perform my job.

N/A	1	2	3	4	5
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. The information was presented in a logical and clear manner.

N/A	1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. The time allotted for the presentation was appropriate.

N/A	1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. The audio and visual materials were effective.

N/A	1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. I would like to hear from this speaker again in the future. YES NO

7. Do you have any questions for this speaker? Please enter the details below or select "N/A".

N/A	
-----	--

8. Would you like to attend this event next year in person or virtual?

9. Did you experience any technical difficulties?

N/A	Yes, I experienced the following difficulties:
-----	--

10. Next program year, would you consider assisting in the following areas (select as many as you like)

N/A	Social Platform	Community Service	Education & Training	Communication	Special Events
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Provide additional comments or topics you would like to see covered in future workshops.

Printed Name (for certificate): _____

Signature _____ Date _____

Email address (for certificate): _____

Workshop Evaluation: For credit, return all completed evaluations to: marina.goode@deca.mil

Workshop #5: "Transformational Leadership"
 Workshop Credit: 1.0 CPE
 Presenter Names: Mr. Jason Buys, Comptroller, DLA Richmond

Rate the Program – Please use this scale to indicate the extent to which you agree with the following statements					
1 = Strongly Disagree / 2 = Disagree / 3 = Neither Agree nor Disagree / 4 = Agree / 5 = Strongly Agree					
1. Provide three take-aways from this course that are most applicable to your job. (Mandatory response)					
2. This lesson will improve my ability to perform my job.					
N/A <input type="radio"/>	1 <input checked="" type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
3. The information was presented in a logical and clear manner.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
4. The time allotted for the presentation was appropriate.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
5. The audio and visual materials were effective.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
6. I would like to hear from this speaker again in the future. YES <input type="radio"/> NO <input type="radio"/>					
7. Do you have any questions for this speaker? Please enter the details below or select "N/A".					
N/A <input type="radio"/>					
8. Would you like to attend this event next year in person <input type="radio"/> or virtual? <input type="radio"/>					
9. Did you experience any technical difficulties?					
N/A <input type="radio"/>	Yes, I experienced the following difficulties:				
10. Next program year, would you consider assisting in the following areas (select as many as you like)					
N/A <input type="radio"/>	Social Platform <input type="radio"/>	Community Service <input type="radio"/>	Education & Training <input type="radio"/>	Communication <input type="radio"/>	Special Events <input type="radio"/>
11. Provide additional comments or topics you would like to see covered in future workshops.					

Printed Name (for certificate): _____

Signature _____ Date _____

Email address (for certificate): _____

Workshop Evaluation: For credit, return all completed evaluations to: marina.goode@deca.mil

Workshop #6: "Bridging Ordinary Data to Extraordinary Data"

Workshop Credit: 1.0 CPE

Presenter Names: Mr. Shea McCullough, Financial Systems Analyst, DLA Richmond

Rate the Program – Please use this scale to indicate the extent to which you agree with the following statements					
1 = Strongly Disagree / 2 = Disagree / 3 = Neither Agree nor Disagree / 4 = Agree / 5 = Strongly Agree					
1. Provide three take-aways from this course that are most applicable to your job. (Mandatory response)					
2. This lesson will improve my ability to perform my job.					
N/A <input type="radio"/>	1 <input checked="" type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
3. The information was presented in a logical and clear manner.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
4. The time allotted for the presentation was appropriate.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
5. The audio and visual materials were effective.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
6. I would like to hear from this speaker again in the future. YES <input type="radio"/> NO <input type="radio"/>					
7. Do you have any questions for this speaker? Please enter the details below or select "N/A".					
N/A <input type="radio"/>					
8. Would you like to attend this event next year in person <input type="radio"/> or virtual? <input type="radio"/>					
9. Did you experience any technical difficulties?					
N/A <input type="radio"/>	Yes, I experienced the following difficulties:				
10. Next program year, would you consider assisting in the following areas (select as many as you like)					
N/A <input type="radio"/>	Social Platform <input type="radio"/>	Community Service <input type="radio"/>	Education & Training <input type="radio"/>	Communication <input type="radio"/>	Special Events <input type="radio"/>
11. Provide additional comments or topics you would like to see covered in future workshops.					

Printed Name (for certificate): _____

Signature _____ Date _____

Email address (for certificate): _____

Workshop Evaluation: For credit, return all completed evaluations to: marina.goode@deca.mil

Workshop #7: "Visualizing Data to Identify Actionable Solutions"

Workshop Credit: 1.0 CPE

Presenter Names: Tyler Duran, IT Portfolio Manager & Alexander Garner, Cost and Data Analyst, Augur Consulting

Rate the Program – Please use this scale to indicate the extent to which you agree with the following statements					
1 = Strongly Disagree / 2 = Disagree / 3 = Neither Agree nor Disagree / 4 = Agree / 5 = Strongly Agree					
1. Provide three take-aways from this course that are most applicable to your job. (Mandatory response)					
2. This lesson will improve my ability to perform my job.					
N/A <input type="radio"/>	1 <input type="checkbox"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
3. The information was presented in a logical and clear manner.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
4. The time allotted for the presentation was appropriate.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
5. The audio and visual materials were effective.					
N/A <input type="radio"/>	1 <input type="radio"/>	2 <input type="radio"/>	3 <input type="radio"/>	4 <input type="radio"/>	5 <input type="radio"/>
6. I would like to hear from this speaker again in the future. YES <input type="radio"/> NO <input type="radio"/>					
7. Do you have any questions for this speaker? Please enter the details below or select "N/A".					
N/A <input type="radio"/>					
8. Would you like to attend this event next year in person <input type="radio"/> or virtual? <input type="radio"/>					
9. Did you experience any technical difficulties?					
N/A <input type="radio"/>	Yes, I experienced the following difficulties:				
10. Next program year, would you consider assisting in the following areas (select as many as you like)					
N/A <input type="radio"/>	Social Platform <input type="radio"/>	Community Service <input type="radio"/>	Education & Training <input type="radio"/>	Communication <input type="radio"/>	Special Events <input type="radio"/>
11. Provide additional comments or topics you would like to see covered in future workshops.					

Printed Name (for certificate): _____

Signature _____ Date _____

Email address (for certificate): _____