

Small Urban & Rural Transit Center
Business Plan Training
Video Conference TLN
October 18, 2005
Fargo, North Dakota

Fax to: (701) 231-1945 or email to gary.hegland@ndsu.edu

1. Circle the **number** that best reflects your interest in this topic before you took this course:

Not Interested 1 2 3 4 5 6 **Extremely Interested**

2. Why did you take this course? And what were your expectations?

Please indicate the quality of this course by circling a number:

3a. Effectiveness of instructor: (Jim Miller)	Not Satisfactory	1	2	3	4	5	6	Excellent
3b. Effectiveness of TLN system:	Not Satisfactory	1	2	3	4	5	6	Excellent

Comments:

4. Did the Video class enhance your understanding of a business plan **Not Satisfactory** 1 2 3 4 5 6 **Excellent**

Comments:

5. If you were less than satisfied with the quality of the material covered in this course, please explain:

Comments: _____

6. How appropriate was the level of the course content in terms of your background and expertise?

Much Below My Level 1 2 3 4 5 6 **Much Above My Level**

Comments: _____

7. Overall, how relevant is the course content to your job?

Not Relevant 1 2 3 4 5 6 **Extremely Relevant**

8. Overall, how much did you learn in this course?

Learned Very Little 1 2 3 4 5 6 **Learned A Lot**

9. Based on your work situation, how useful was the course content to you and your employer? Explain

10. Would you recommend this course to others? Yes No Explain

11. Which portions of this course stood out as being especially relevant or irrelevant?

Relevant: _____

Irrelevant: _____

12. Did the course meet your expectations? Yes No Explain

13. What other training topics would you recommend that SURTC develop?

14. How did you learn of this course?

SURTC email Mail flyer SURTC Web page State Transit organization

From a friend Colleague other: _____

15. Would you like to be contacted regarding future courses and other topics information? Yes No
Optional (necessary if you answered Yes to # 15):

Name: _____ Employer: _____ Email: _____

Date: 10/18/05 Participation Site (City and State): _____