State of California | DEPARTMENT OF WATER RESOURCES | California Natural Resources Agency

MASTER ATTENDANCE ROSTER

Please submit to the Training Office with the Final Course Evaluations (DWR 9535).

COURSE TITLE	START DATE	CLASS DAYS
Emergency Response GIS Specialist Training	**12/1/11**	**1**
INSTRUCTOR	TIME	CLASS COST
Baldwin, Boggs, Matteoli, Mulder, Schafer-Kramer	**0830-1600**	**$0.00**
CO-INSTRUCTOR	CITY WHERE CLASS IS TO BE HELD	
	FOC, Joint Operations Center	

PLEASE PRINT CLEARLY

PARTICIPANT NAME (Print)	PARTICIPANT'S SIGNATURE (Required)	SAP EMPLOYEE NUMBER	SAP COST OBJECT	INITIAL AND DATE M	TU	W	TH	F
1. RICKY DOUNG		6792						
2. MARK RABO		7508						
3. SCOTT KENNEDY		2779						
4. Jason Harbaugh		7159						
5. Jane Schafer Kramer		5477						
6. Mathy Mathiyarasu		8123						
7. Pat Gilbert		7817						
8. CHRISTINA BOGGS		8410						
9. Jeff Galet		6354						
10. JON MULDER								
11. Ke Zhong		7285						
12.								
13.								
14.								
15.								
16.								
17.								
18.								
19.								
20.								

TRAINING OFFICE USE ONLY	DATE	INITIAL
Attendance Roster Received		
To TOTS		
To TOOS		
SAP Follow-up		
To TO Manager		
To File Station 5		

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?

   The hands-on map making.

2. What portion of the course had the least value? Why?

   Seeing the communications trailer, but not firing up the equipment.

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 (8) 9 10 Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?

More hands-on stuff. Two days would be great.

Name (Optional) Jeff Galet Division/Office Fresno

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?

   Hands on ArcMap

2. What portion of the course had the least value? Why?

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Comment? Good to have materials available for everyone to take

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?

For IAPmap - it would have been good to have a demo all the way through the process before setting us loose to do on our own

Name (Optional) _____ Division/Office _____

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?

ArcGIS w/ 6

2. What portion of the course had the least value? Why?

it's all useful.

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 (9) 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?

I learned new info regarding GIS.

Name (Optional) _____ Division/Office DFM / FPU

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?

   Demo & HAND ON TRAINING

2. What portion of the course had the least value? Why?

   N/A

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 (8) 9 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 (8) 9 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 (7) 8 9 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 (7) 8 9 10 Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 (8) 9 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?

Name (Optional) _____ Division/Office _____

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?
   Collaborating on the workflows, learning the levee locator tool
2. What portion of the course had the least value? Why?
   delays due to technical glitches.

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?
polish up the Standard operating Guidelines manual

Name (Optional) Jane Schafer Kramer Division/Office Bay Delta Office

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?
   LEARNING the PLANNING SECTIONS "GIS MINIMUM EXPECTATIONS" ~~MINIMUM~~

2. What portion of the course had the least value? Why? ?

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?
MOVE A LITTLE SLOWER DURING the MAP MAKING PORTION – THE COMPUTERS WERE SLOW + MANY STUDENTS COULD NOT KEEP UP.

Name (Optional) _____ Division/Office _____

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?

Learning about what data was available and what tool what's the structure and templates as well

2. What portion of the course had the least value? Why?

Communications trailer. I already am involved + have used the trailer. It was helpful though for people that haven't seen or used it.

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?

Better Computers to run ArcGIS.

Name (Optional) _____ Division/Office _____

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?

① Creating Geo spatial PDFs, ② External hard drive with (all) necessary data & using ③ Instructor's knowledge & other participants knowledge in GIS

2. What portion of the course had the least value? Why?

— Nothing —

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 9 10 Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?

Name (Optional) _____ Division/Office DFM / FMO

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.

State of California | DEPARTMENT OF WATER RESOURCES Training Office | California Natural Resources Agency

FINAL COURSE EVALUATION

These evaluations are taken very seriously. Please take the time to fill them out completely. Your opinion will be noted by the instructor(s), the Chief of the Training Office, and the DWR Governance Board.

COURSE TITLE: **Emergency Response GIS Specialist Training** DATE: **12/1/2011**

1. What portion of the course had the most value to you?

   THE HANDS-ON PORTION.

2. What portion of the course had the least value? Why?

RANK THE FOLLOWING ON A SCALE FROM 1 – 10 BY CIRCLING THE APPROPRIATE NUMBER

What is your overall impression of this course?

Poor 1 2 3 4 5 6 7 8 9 (10) Excellent

Were the subjects covered in this course pertinent to your needs and interests?

Poor 1 2 3 4 5 6 7 8 9 (10) Excellent

How were these subjects covered in the course?

Poor 1 2 3 4 5 6 7 8 9 (10) Excellent

How would you rate the effectiveness of the course materials?

Poor 1 2 3 4 5 6 7 8 9 (10) Excellent

Comment?

How would you rate the effectiveness of the instructor(s)?

Poor 1 2 3 4 5 6 7 8 9 (10) Excellent

Comment?

Do you have any suggestions or comments on how this course could be improved?

BETTER COMPUTERS. PREMADE GRAPIC TABLE OF CONTENTS W/ ALL SYMBOLS. DYNAMIC LBLS.

Name (Optional) _____ Division/Office _____

Please give this evaluation back to the instructor(s), who will return it to the DWR Training Office, 901 P Street, Suite 411a, Sacramento, CA 95814.