

Adapting data management education to support clinical research projects in an academic medical center

Kevin B. Read

APPENDIX

Evaluation form

[Class name]

[Date] | [Instructor Name]

Affiliation:

- | | |
|---|---|
| <input type="checkbox"/> School of Medicine | <input type="checkbox"/> College of Nursing |
| <input type="checkbox"/> College of Dentistry | <input type="checkbox"/> Tisch Hospital |
| <input type="checkbox"/> Resident | <input type="checkbox"/> Other |
| | <input type="checkbox"/> _____ |

Department/Division: _____

Role:

- | | |
|---|--|
| <input type="checkbox"/> Faculty | <input type="checkbox"/> Postdoc |
| <input type="checkbox"/> Medical student | <input type="checkbox"/> Administrator |
| <input type="checkbox"/> Resident | <input type="checkbox"/> Intern |
| <input type="checkbox"/> Project/Research coordinator | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Graduate student | _____ |

What did you hope to get out of this class?

Will you use what you learned in this class in your work?

- Definitely will
- Probably will
- Probably won't
- Definitely won't

Was the level of material presented:

- Too low
- Just right
- Too advanced

Would you recommend class to others?

- Highly recommend
- Recommend
- Recommend w/ reservations
- Not recommend

How will you use what you learned in today's training in your current role?

Interested in adv topics?

- Yes
- No

What other topics would you be interested in learning in?

Share any other comments about this class?