

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK WORKSHOP Session Dates FEB. 20-21, 02

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?   Yes X   No \_\_\_\_\_

D. What were the strengths of the course? Knowledgeable instructor, good class participation,

E. What are your recommendations for improvement? add additional exercises

F. Additional comments? \_\_\_\_\_

154

Name (optional) J. Beale   Organization ACT-410

# FAA ICIP Course/Workshop Critique



Course/Workshop Name Risk Mitigation Session Dates 2-19-20-2002

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | 5 |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | 5 |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | 5 |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | 5 |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | 5 |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | 5 |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | 5 |

C. Would you recommend this course to co-workers?   Yes    No

D. What were the strengths of the course? \_\_\_\_\_

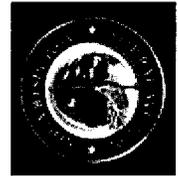
E. What are your recommendations for improvement? \_\_\_\_\_

F. Additional comments? NONE

Name (optional) \_\_\_\_\_

Organization ACT-410

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 2/20 - 2/21/02

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4   | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | (4) | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4   | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4   | (5) |

C. Would you recommend this course to co-workers?

Yes X    No \_\_\_\_\_

D. What were the strengths of the course? The exercise provided practical application.

E. What are your recommendations for improvement? None

F. Additional comments?

Name (optional) Steve Viveiros

Organization ACT-320

# FAA ICIP Course/Workshop Critique



Course/Workshop Name Risk Mgmt Session Dates Feb 20-21

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |          |
|--|---|---|---|---|----------|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | <u>5</u> |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | <u>5</u> |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | 5        |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | <u>5</u> |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |          |
|---|---|---|---|---|----------|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | <u>5</u> |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | 5        |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | 5        |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | <u>5</u> |

C. Would you recommend this course to co-workers?   Yes    No

D. What were the strengths of the course? All, especially EXERCISES

E. What are your recommendations for improvement? None

F. Additional comments?

154

Name (optional) ALCANTARA

Organization ACT-423

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MITIGATION Session Dates 2/20-21/02

**A. Questions 1-6 (circle one number only please)**

	<u>NO</u>	<u>SOMEWHAT</u>	<u>YES</u>
1. Were the overall course/workshop objectives made clear?	1	2	3 4 <u>5</u>
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3 4 <u>5</u>
3. Were challenging problems or questions for discussion raised during the course?	1	2	3 <u>4</u> 5
4. Were the major points and concepts presented clearly?	1	2	3 <u>4</u> 5

**B. Questions 5-8**

	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>
5. How would you rate the quality of the material covered and provided?	1	2	3 <u>4</u> 5
6. How would you rate the pacing and speed of the material covered?	1	2	<u>3</u> 4 5
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	<u>3</u> 4 5
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	<u>3</u> 4 5

C. Would you recommend this course to co-workers? Yes \_\_\_\_\_ No

D. What were the strengths of the course?

*It raised my awareness of COTS risks, and I learned an approach that will help me manage COTS risks in a logical, methodical manner.*

E. What are your recommendations for improvement?

*Spend less time on Modules 1 through 3. Module 4 is very long. It needs to be presented, but many people were losing interest. Add activities, or break up the module.*

F. Additional comments?

*PAGE 137, Line item 3, Notes: Make reference that existing Graphics language is incompatible with Flat Panel.*

154

Name (optional) DAVID DOTSEY Organization ACT-231

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MITIGATION Session Dates 20-21 Feb 02

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?   Yes X   No \_\_\_\_\_

D. What were the strengths of the course? Instructor

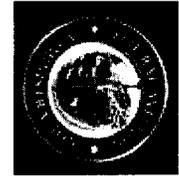
E. What are your recommendations for improvement? None

F. Additional comments? \_\_\_\_\_

Name (optional) GEORGE BARDON

Organization ACT-233

# FAA ICIP Course/Workshop Critique



Course/Workshop Name Cots Risk Mgmt. Session Dates \_\_\_\_\_

**A. Questions 1-6 (circle one number only please)**

	<u>NO</u>	<u>SOMEWHAT</u>	<u>YES</u>	
1. Were the overall course/workshop objectives made clear?	1	2	3	4 (5)
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3	4 (5)
3. Were challenging problems or questions for discussion raised during the course?	1	2	3	4 (5)
4. Were the major points and concepts presented clearly?	1	2	3	4 (5)

**B. Questions 5-8**

	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>	
5. How would you rate the quality of the material covered and provided?	1	2	3	4 (5)
6. How would you rate the pacing and speed of the material covered?	1	2	3	4 (5)
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3	4 (5)
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3	4 (5)

C. Would you recommend this course to co-workers? Yes  No \_\_\_\_\_

**D. What were the strengths of the course?**

The instructor "tells it like it is" - provides  
A realistic "heads-up-approach" Great direction  
for evaluating "obsolescence" - with approaches to  
work towards resolutions.

**E. What are your recommendations for improvement?**

Insert Acronyms missing from  
the text in the Appendix H.

**F. Additional comments?**

Outstanding, interesting presentation.

154

Name (optional) Mary Galay Organization ACT-560

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Workshop Session Dates 02/20-21

**A. Questions 1-6 (circle one number only please)**

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

**B. Questions 5-8**

LOW    MEDIUM    HIGH

- |   |   |   |     |   |     |
|---|---|---|-----|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3   | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | (3) | 4 | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3   | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3   | 4 | (5) |

C. Would you recommend this course to co-workers?    Yes X    No \_\_\_\_\_

D. What were the strengths of the course? The exercise was good for reinforcing the concepts.

E. What are your recommendations for improvement? \_\_\_\_\_

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_ Organization ACT-400

# FAA ICIP Course/Workshop Critique



*COTS Risk Mitigation Guide: Practical Methods For Effective COTS Acquisition and Life Cycle Support*

Course/Workshop Name Practical Methods For Effective COTS Acquisition and Life Cycle Support Session Dates 2/20-21/02

**A. Questions 1-6 (circle one number only please)**

	NO	SOMEWHAT			YES
1. Were the overall course/workshop objectives made clear?	1	2	3	4	5
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3	4	5
3. Were challenging problems or questions for discussion raised during the course?	1	2	3	4	5
4. Were the major points and concepts presented clearly?	1	2	3	4	5

**B. Questions 5-8**

	LOW	MEDIUM			HIGH
5. How would you rate the quality of the material covered and provided?	1	2	3	4	5
6. How would you rate the pacing and speed of the material covered?	1	2	3	4	5
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3	4	5
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3	4	5

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course? Applicability to Real life examples  
Knowledgeable instructor; good materials

E. What are your recommendations for improvement? Allow enough time for course such that adequate breaks can be provided. This way you don't have to miss any of class if you don't want to.

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_

Organization ACT-230

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS TRAINING Session Dates 2-19 & 2-20

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?

Yes

No

D. What were the strengths of the course? The strengths were the exercise at the end.

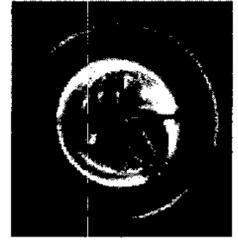
E. What are your recommendations for improvement? NONE

F. Additional comments?

Name (optional) Stephanie Bell

Organization ACT-411

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mit. Strategy Session Dates 3/6-7/02

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?   Yes    No

D. What were the strengths of the course? Addresses COTS issues that acquisition folks need to be cognizant of at various stages of life cycle

E. What are your recommendations for improvement? As specific products for use in contracts as developed, recommend that they be provided to attendees. Also recommend that any follow-on lessons be provided as they become available.

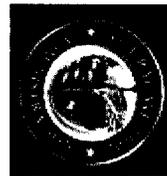
F. Additional comments? Excellent class for acquisition employees

154

Name (optional) Timme McArthur

Organization Awa-200

# FAA ICIP Course/Workshop Critique



Course/Workshop Name \_\_\_\_\_ Session Dates 3/6 - 3/7/02

**A. Questions 1-6 (circle one number only please)**

NO    SOMEWHAT    YES

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | 5 |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | 5 |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | 5 |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | 5 |

**B. Questions 5-8**

LOW    MEDIUM    HIGH

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | 5 |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | 5 |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | 5 |

C. Would you recommend this course to co-workers?    Yes     No \_\_\_\_\_

D. What were the strengths of the course? Instructor had thorough understanding of topic

\_\_\_\_\_

\_\_\_\_\_

E. What are your recommendations for improvement? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

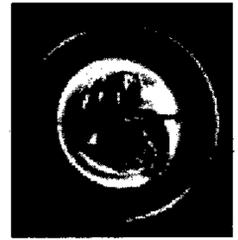
F. Additional comments? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Assessment Session Dates March 6-7, 2002

A. Questions 1-6 (circle one number only please)

	<u>NO</u>	<u>SOMEWHAT</u>			<u>YES</u>
1. Were the overall course/workshop objectives made clear?	1	2	3	4	(5)
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3	4	(5)
3. Were challenging problems or questions for discussion raised during the course?	1	2	3	4	(5)
4. Were the major points and concepts presented clearly?	1	2	3	4	(5)

B. Questions 5-8

	<u>LOW</u>	<u>MEDIUM</u>			<u>HIGH</u>
5. How would you rate the quality of the material covered and provided?	1	2	3	4	(5)
6. How would you rate the pacing and speed of the material covered?	1	2	3	(4)	5
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3	(4)	5
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3	4	(5)

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course? Direct Comparison to actual Programs and "Real" Case Studies.

E. What are your recommendations for improvement?

Use CD-Rom based tool for instruction and demonstration that participants can take back to use in their work.

F. Additional comments? Very good stuff!

154

Name (optional) Sal Mumayiz

Organization SETA-II

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK Mitigation workshop      Session Dates March 4-7, 2002

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | ④ | 5 |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | ④ | 5 |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | ④ | 5 |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | ④ | 5 |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | ④ | 5 |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | ④ | 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | ④ | 5 |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | ④ | 5 |

C. Would you recommend this course to co-workers?      Yes       No

D. What were the strengths of the course? lots of opportunity for discussion, references to COTS RISK Mitigation Guide, COTS RISK Analysis exercise walk-through

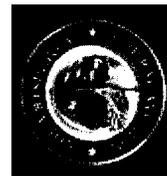
E. What are your recommendations for improvement? Please widen the audience for broadcast messages regarding additional courses.

F. Additional comments? \_\_\_\_\_

154

Name (optional) Wally Waldman Singatch      Organization AF2-500

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 3/6-7/02  
WORKSHOP

- A. Questions 1-6 (circle one number only please)**
- |  | <u>NO</u> | <u>SOMEWHAT</u> |   | <u>YES</u> |     |
|--|-----------|-----------------|---|------------|-----|
|  | 1         | 2               | 3 | 4          |     |
| 1. Were the overall course/workshop objectives made clear?                           | 1         | 2               | 3 | 4          | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1         | 2               | 3 | 4          | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1         | 2               | 3 | 4          | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1         | 2               | 3 | 4          | (5) |

- B. Questions 5-8**
- |   | <u>LOW</u> | <u>MEDIUM</u> |   | <u>HIGH</u> |     |
|---|------------|---------------|---|-------------|-----|
|   | 1          | 2             | 3 | 4           |     |
| 5. How would you rate the quality of the material covered and provided?                               | 1          | 2             | 3 | 4           | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1          | 2             | 3 | 4           | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1          | 2             | 3 | 4           | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1          | 2             | 3 | 4           | (5) |

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course? material and the instructor knowledge of the subject matter

E. What are your recommendations for improvement? \_\_\_\_\_

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MITIGATION Session Dates 3/6-7/02

**A. Questions 1-6 (circle one number only please)**

NO   SOMEWHAT   YES

- 1. Were the overall course/workshop objectives made clear?      1   2   3   4   5
- 2. Was there agreement between course/workshop objectives and the material provided?      1   2   3   4   5
- 3. Were challenging problems or questions for discussion raised during the course?      1   2   3   4   5
- 4. Were the major points and concepts presented clearly?      1   2   3   4   5

**B. Questions 5-8**

LOW   MEDIUM   HIGH

- 5. How would you rate the quality of the material covered and provided?      1   2   3   4   5
- 6. How would you rate the pacing and speed of the material covered?      1   2   3   4   5
- 7. How would you rate the usefulness and practical application of this course/workshop to your job?      1   2   3   4   5
- 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?      1   2   3   4   5

C. Would you recommend this course to co-workers?      Yes       No

D. What were the strengths of the course? CLEAR / CONCISE METHODOLOGY TO IDENTIFY & MITIGATE RISKS.

E. What are your recommendations for improvement?

F. Additional comments?

Name (optional) THOMAS DINTO      Organization ASD-140 / SETA II

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 3/4/02-3/7/02

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?

Yes X                      No \_\_\_\_\_

D. What were the strengths of the course? Course was clear and concise. There was no fluff, the instructor outlined an agenda and followed it without overlooking questions and concerns of his audience.

E. What are your recommendations for improvement?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

F. Additional comments?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name \_\_\_\_\_ Session Dates \_\_\_\_\_

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | ⑤ |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | ⑤ |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | ⑤ |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | ⑤ |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | ⑤ |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | ⑤ |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | ⑤ |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | ⑤ |

C. Would you recommend this course to co-workers?    Yes X    No \_\_\_\_\_

D. What were the strengths of the course? THE TEST CASE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E. What are your recommendations for improvement? DEFINE WHICH PARTICULAR FAA ORGANIZATIONS ARE RESPONSIBLE FOR IMPLEMENTING THE CONCEPTS ADDRESSED IN THIS WORKSHOP

\_\_\_\_\_

\_\_\_\_\_

F. Additional comments? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Wkshp Session Dates 3/11 & 12

- A. Questions 1-6 (circle one number only please)**
- |  | <u>NO</u> | <u>SOMEWHAT</u> | <u>YES</u>   |
|--|-----------|-----------------|--------------|
| 1. Were the overall course/workshop objectives made clear?                           | 1         | 2               | 3 4 <b>5</b> |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1         | 2               | 3 4 <b>5</b> |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1         | 2               | 3 <b>4</b> 5 |
| 4. Were the major points and concepts presented clearly?                             | 1         | 2               | 3 4 <b>5</b> |

- B. Questions 5-8**
- |   | <u>LOW</u> | <u>MEDIUM</u> | <u>HIGH</u>  |
|---|------------|---------------|--------------|
| 5. How would you rate the quality of the material covered and provided?                               | 1          | 2             | 3 4 <b>5</b> |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1          | 2             | 3 <b>4</b> 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | <b>1</b>   | 2             | 3 4 5        |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1          | 2             | 3 4 <b>5</b> |

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course? Instructor's knowledge of material; extremely well versed on this subject.

E. What are your recommendations for improvement? Try to engage more class discussion; it helps relate the material to experiences (i.e. been there, done that).

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 3/11-12/2002

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?

Yes

No

D. What were the strengths of the course? Instructor very energetic and engaging. Made the material interesting. Course material and exercise very in-depth for such a course.

E. What are your recommendations for improvement?

Only that the course seems 'in the works' - in other words, it is very good, but can be tweaked to be better. One very small example - course hard copy student book was not the same (exactly - but VERY close) to instructor's presentation.

F. Additional comments?

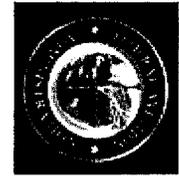
Overall, very very good course made even better by Mr. Gordon Shaffer's excellent job teaching. Great!!

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Name (optional) \_\_\_\_\_

Organization AUATAC

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 3/11-12

- A. Questions 1-6 (circle one number only please)
- |  | <u>NO</u> | <u>SOMEWHAT</u> | <u>YES</u>   |
|--|-----------|-----------------|--------------|
| 1. Were the overall course/workshop objectives made clear?                           | 1         | 2               | 3 4 <u>5</u> |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1         | 2               | 3 4 <u>5</u> |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1         | 2               | 3 4 <u>5</u> |
| 4. Were the major points and concepts presented clearly?                             | 1         | 2               | 3 4 <u>5</u> |

- B. Questions 5-8
- |   | <u>LOW</u> | <u>MEDIUM</u> | <u>HIGH</u>  |
|---|------------|---------------|--------------|
| 5. How would you rate the quality of the material covered and provided?                               | 1          | 2             | 3 4 <u>5</u> |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1          | 2             | 3 <u>4</u> 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1          | 2             | 3 4 <u>5</u> |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1          | 2             | 3 4 <u>5</u> |

C. Would you recommend this course to co-workers? Yes ✓ No \_\_\_\_\_

D. What were the strengths of the course? PRACTICAL EXERCISES & CLASS INTERACTION & QUESTIONS

E. What are your recommendations for improvement? Implement some of the suggestions provided - can reduce getting to know you time

F. Additional comments? GAVE ME A NEW APPRECIATION & UNDERSTANDING OF COTS & RISK MITIGATION

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Name (optional) \_\_\_\_\_ Organization TAC

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS MITIGATION WORKSHOP Session Dates 3/11-12

- A. Questions 1-6** (circle one number only please)
- |  | <u>NO</u> | <u>SOMEWHAT</u> | <u>YES</u>   |
|--|-----------|-----------------|--------------|
| 1. Were the overall course/workshop objectives made clear?                           | 1         | 2               | 3 4 <u>5</u> |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1         | 2               | 3 4 <u>5</u> |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1         | 2               | 3 4 <u>5</u> |
| 4. Were the major points and concepts presented clearly?                             | 1         | 2               | 3 <u>4</u> 5 |

- B. Questions 5-8**
- |   | <u>LOW</u> | <u>MEDIUM</u> | <u>HIGH</u>  |
|---|------------|---------------|--------------|
| 5. How would you rate the quality of the material covered and provided?                               | 1          | 2             | 3 4 <u>5</u> |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1          | 2             | 3 <u>4</u> 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1          | 2             | 3 <u>4</u> 5 |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1          | 2             | 3 4 <u>5</u> |

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course? Provided excellent understanding of the COTS acquisition & risk mitigation ~~activity~~ process

E. What are your recommendations for improvement? Spend more time on the risk mitigation activity and problem identification and resolution process

F. Additional comments? Good course, should be provided to all contractors involved in the acquisition process

Name (optional) Russ BANTISARI Organization AVATAR

# FAA ICIP Course/Workshop Critique



Course/Workshop Name LOTS RISK MITIGATION Session Dates MARCH 11-12

## A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |              |     |     |     |
|--|---|--------------|-----|-----|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2            | 3   | (4) | 5   |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2            | 3   | (4) | 5   |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | <del>2</del> | (3) | 4   | 5   |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2            | 3   | 4   | (5) |

## B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4   | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | (4) | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | (4) | 5   |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4   | (5) |

C. Would you recommend this course to co-workers?   Yes X   No \_\_\_\_\_

D. What were the strengths of the course? \_\_\_\_\_

THE EXERCISE

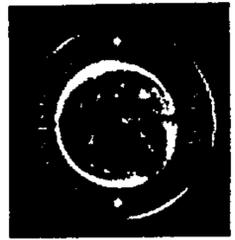
E. What are your recommendations for improvement? \_\_\_\_\_

NEED TO SPEND MORE TIME ON MITIGATION, LESS ON RISK  
HAND-OUTS SHOULD MATCH PROJECTED SLIDES  
MORE ON HOW TO APPLY

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MANAGEMENT Session Dates \_\_\_\_\_

**A. Questions 1-6 (circle one number only please)**

	<u>NO</u>	<u>SOMEWHAT</u>			<u>YES</u>
	1	2	3	4	5
1. Were the overall course/workshop objectives made clear?	1	2	3	4	5
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3	4	5
3. Were challenging problems or questions for discussion raised during the course?	1	2	3	4	5
4. Were the major points and concepts presented clearly?	1	2	3	4	5

**B. Questions 5-8**

	<u>LOW</u>	<u>MEDIUM</u>			<u>HIGH</u>
	1	2	3	4	5
5. How would you rate the quality of the material covered and provided?	1	2	3	4	5
6. How would you rate the pacing and speed of the material covered?	1	2	3	4	5
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3	4	5
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3	4	5

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course? APPLICABILITY TO CURRENT GOVERNMENT

E. What are your recommendations for improvement? \_\_\_\_\_

F. Additional comments? EXCELLENT COURSE ON ANATAC TO HELP PROVIDE SUPPORT TO FAA

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Name (optional) \_\_\_\_\_ Organization ANATAC

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 3/11 - 3/12/02

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |     |     |
|--|---|---|---|-----|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | (4) | 5   |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4   | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | (4) | 5   |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | (4) | 5   |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | (4) | 5   |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4   | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | (4) | 5   |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4   | (5) |

C. Would you recommend this course to co-workers?   Yes    No

D. What were the strengths of the course? INSTRUCTOR, HIGH QUALITY HANDOUTS

E. What are your recommendations for improvement?

F. Additional comments?

Name (optional) \_\_\_\_\_ Organization ACUA TAC

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Michigan Session Dates 3/11 & 12, 2002  
workshop

**A. Questions 1-6 (circle one number only please)**

	NO	SOMEWHAT	YES
1. Were the overall course/workshop objectives made clear?	1	2	3 4 <u>5</u>
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3 4 <u>5</u>
3. Were challenging problems or questions for discussion raised during the course?	1	2	3 4 <u>5</u>
4. Were the major points and concepts presented clearly?	1	2	3 4 <u>5</u>

**B. Questions 5-8**

	LOW	MEDIUM	HIGH
5. How would you rate the quality of the material covered and provided?	1	2	3 4 <u>5</u>
6. How would you rate the pacing and speed of the material covered?	1	2	3 4 <u>5</u>
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3 4 <u>5</u>
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3 4 <u>5</u>

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course?  
good visual presentation  
well prepared presentation

E. What are your recommendations for improvement?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

F. Additional comments?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 11-12 March 2002

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |     |     |     |   |
|--|---|-----|-----|-----|---|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2   | (3) | 4   | 5 |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2   | 3   | (4) | 5 |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | (2) | 3   | 4   | 5 |
| 4. Were the major points and concepts presented clearly?                             | 1 | (2) | 3   | 4   | 5 |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |     |   |   |
|---|---|---|-----|---|---|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | (3) | 4 | 5 |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | (3) | 4 | 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | (3) | 4 | 5 |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | (3) | 4 | 5 |

C. Would you recommend this course to co-workers?    Yes \_\_\_\_\_    No X

D. What were the strengths of the course? Summary of current FAA policies.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E. What are your recommendations for improvement? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

F. Additional comments? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK M.W. Session Dates 3/11-12/2002

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |     |   |     |
|---|---|---|-----|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3   | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3   | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | (3) | 4 | 5   |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3   | 4 | (5) |

C. Would you recommend this course to co-workers?

Yes  No

D. What were the strengths of the course?

Awareness that a process is being implemented;

E. What are your recommendations for improvement?

well Done

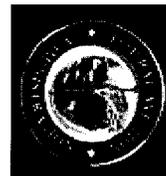
F. Additional comments?

A lot of effort has been put into the development of this course, very good job of delivery

Name (optional) \_\_\_\_\_

Organization AUM-TAC ACS

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MITIGATION Session Dates 11-12 MAR 02

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | 5 |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | 5 |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | 5 |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | 5 |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | 5 |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | 5 |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | 5 |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | 5 |

C. Would you recommend this course to co-workers?   Yes    No

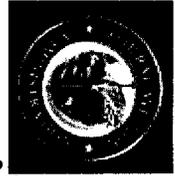
D. What were the strengths of the course? WELL PREPARED INSTRUCTOR.  
OUTSTANDING HANDOUTS. MATERIAL PRESENTED IN AN  
EXTREMELY LOGICAL MANNER.

E. What are your recommendations for improvement? More time for exercises.  
More emphasis on the Mitigation Strategies

F. Additional comments? PLEASANT TRAINING OPPORTUNITY.

Name (optional) \_\_\_\_\_ Organization ENROUTE

# FAA ICIP Course/Workshop Critique



COTS RISK

Course/Workshop Name MITIGATION WORKSHOPS Session Dates 3/11 - 3/12/2002

## A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

## B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?   Yes X   No \_\_\_\_\_

(GORDON SHAFFER)

D. What were the strengths of the course? INSTRUCTOR WAS INTIMATELY FAMILIAR WITH COURSE INFORMATION. HE (GORDON) EXPLAINED DETAILS AND GAVE ANSWERS TO ALL QUESTIONS POSED. I WAS IMPRESSED WITH HIS ABILITY TO CONNECT PARTICIPANT'S NAME AND QUESTION ASKED. HE WOULD ALWAYS GO BACK TO EXAMPLES TO REINFORCE MATERIAL.

E. What are your recommendations for improvement?  
NONE - OUTSTANDING COURSE

F. Additional comments? \_\_\_\_\_

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Name (optional) Joe Chlebowski Organization AVATAR

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 3/11-3/12/02

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |     |     |
|--|---|---|---|-----|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4   | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4   | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | (4) | 5   |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4   | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4   | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | (4) | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4   | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4   | (5) |

C. Would you recommend this course to co-workers?    Yes \_\_\_\_\_    No

D. What were the strengths of the course?

Clear presentation of materials, easily understood  
very positive and helpful

E. What are your recommendations for improvement?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

F. Additional comments?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Name (optional) A. J. Farley

Organization ALCA - AC

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTs

Session Dates 3/11/12

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |     |     |
|--|---|---|---|-----|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4   | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4   | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4   | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | (4) | 5   |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | (4) | 5   |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | (4) | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4   | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | (4) | 5   |

C. Would you recommend this course to co-workers?

Yes     No

D. What were the strengths of the course? EXPLORATION OF COTS AND WHAT IT MEANS AND CAN MEAN TO THE FAA

E. What are your recommendations for improvement? A FOLLOW ON REFRESH AND "HOW IT WORKS" SESSION WOULD BE GOOD.

F. Additional comments? STILL A LITTLE CONFUSION ON NDI

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Name (optional) BARRY BUSENA

Organization TAL

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 3-11/12-02

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4   | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | (4) | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | (4) | 5   |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4   | (5) |

C. Would you recommend this course to co-workers?    Yes     No

D. What were the strengths of the course? Knowledge of Instructor

E. What are your recommendations for improvement? Shorter introduction and longer time for exercise.

F. Additional comments? \_\_\_\_\_

Name (optional) A. Burner

Organization ACM-TAC

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK M.I.T.I.G.A Session Dates 03/11 - 03/12

- A. Questions 1-6 (circle one number only please)
- |  | <u>NO</u> | <u>SOMEWHAT</u> | <u>YES</u>   |
|--|-----------|-----------------|--------------|
| 1. Were the overall course/workshop objectives made clear?                           | 1         | 2               | 3 4 <u>5</u> |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1         | 2               | 3 4 <u>5</u> |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1         | 2               | 3 4 <u>5</u> |
| 4. Were the major points and concepts presented clearly?                             | 1         | 2               | 3 4 <u>5</u> |

- B. Questions 5-8
- |   | <u>LOW</u> | <u>MEDIUM</u> | <u>HIGH</u>  |
|---|------------|---------------|--------------|
| 5. How would you rate the quality of the material covered and provided?                               | 1          | 2             | 3 4 <u>5</u> |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1          | 2             | 3 4 <u>5</u> |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1          | 2             | 3 4 <u>5</u> |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1          | 2             | 3 4 <u>5</u> |

C. Would you recommend this course to co-workers? Yes  No

D. What were the strengths of the course? CLARITY, UNDERSTADABILITY

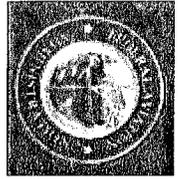
E. What are your recommendations for improvement? SHOW AN EXAMPLE WHERE THE RATE OF FAILURE WILL IMPACT THE "DROP DEAD" DATE (EOM) DATE TO RENDER TECH + REFRESH ~~AND~~ EFFORTS IMPOSSIBLE DUE TO DIFFICULT FUNDING (RE) CONSIDERATIONS

F. Additional comments?

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Name (optional) PAUL G Organization AVATAC

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 5/1/02-5/2/02

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |          |          |
|--|---|---|---|----------|----------|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4        | <u>5</u> |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4        | <u>5</u> |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4        | <u>5</u> |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | <u>4</u> | 5        |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |          |          |
|---|---|---|---|----------|----------|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | <u>4</u> | 5        |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | <u>4</u> | 5        |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4        | <u>5</u> |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | <u>4</u> | 5        |

C. Would you recommend this course to co-workers?   Yes X   No \_\_\_\_\_

D. What were the strengths of the course? Provided good, practical information that can be used immediately with respect to project goals.

E. What are your recommendations for improvement? Allow more time for discussion of material. The length of the class might be a little short if there are active participants.

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_

Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISKS Mitigation Session Dates MAY 1-2

A. Questions 1-6 (circle one number only please)

	<u>NO</u>	<u>SOMEWHAT</u>	<u>YES</u>
1. Were the overall course/workshop objectives made clear?	1	2	3 4 <u>5</u>
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3 4 <u>5</u>
3. Were challenging problems or questions for discussion raised during the course?	1	2	3 <u>4</u> 5
4. Were the major points and concepts presented clearly?	1	2	3 4 <u>5</u>

B. Questions 5-8

	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>
5. How would you rate the quality of the material covered and provided?	1	2	3 <u>4</u> 5
6. How would you rate the pacing and speed of the material covered?	1	2	3 <u>4</u> 5
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3 4 <u>5</u>
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3 4 <u>5</u>

C. Would you recommend this course to co-workers? Yes X No \_\_\_\_\_

D. What were the strengths of the course? The form the course was presented, delivery of the information and simplicity. The information was presented clearly and a process that can be repeated was given and explained.

E. What are your recommendations for improvement? Provide templates for future use.

F. Additional comments? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MITIGATION Session Dates 5/1/02 - 5/2/02

A. Questions 1-6 (circle one number only please)

	<u>NO</u>	<u>SOMEWHAT</u>	<u>YES</u>	
1. Were the overall course/workshop objectives made clear?	1	2	3	4 <u>5</u>
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3	4 <u>5</u>
3. Were challenging problems or questions for discussion raised during the course?	1	2	3	4 <u>5</u>
4. Were the major points and concepts presented clearly?	1	2	3	4 <u>5</u>

B. Questions 5-8

	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>	
5. How would you rate the quality of the material covered and provided?	1	2	3	4 <u>5</u>
6. How would you rate the pacing and speed of the material covered?	1	2	3	4 <u>5</u>
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3	4 <u>5</u>
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3	4 <u>5</u>

C. Would you recommend this course to co-workers?

Yes  No

D. What were the strengths of the course? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

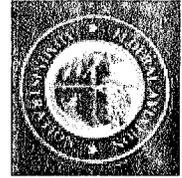
E. What are your recommendations for improvement? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

F. Additional comments? I enjoyed this class very much and learned a great deal from you the class and the other classmates. Thank you!

Name (optional) Mindy Newling

Organization ACB-510

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates 5/1 - 5/2/02

A. Questions 1-6 (circle one number only please)

NO   SOMEWHAT   YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW   MEDIUM   HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?   Yes X   No \_\_\_\_\_

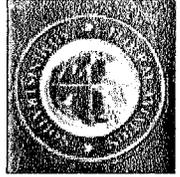
D. What were the strengths of the course? critical subject - explain well - practical examples and exercise

E. What are your recommendations for improvement? \_\_\_\_\_

F. Additional comments? will be recommending to 300 manager's and leads - hope AUA-600 is aware and practicing this

Name (optional) Frank Happel   Organization AOS-305

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mgmt Session Dates 5/1/02 - 5/2/02

A. Questions 1-6 (circle one number only please)

	<u>NO</u>	<u>SOMEWHAT</u>	<u>YES</u>
1. Were the overall course/workshop objectives made clear?	1	2	3 4 <u>5</u>
2. Was there agreement between course/workshop objectives and the material provided?	1	2	3 4 <u>5</u>
3. Were challenging problems or questions for discussion raised during the course?	1	2	3 4 <u>5</u>
4. Were the major points and concepts presented clearly?	1	2	3 4 <u>5</u>

B. Questions 5-8

	<u>LOW</u>	<u>MEDIUM</u>	<u>HIGH</u>
5. How would you rate the quality of the material covered and provided?	1	2	3 4 <u>5</u>
6. How would you rate the pacing and speed of the material covered?	1	2	3 4 <u>5</u>
7. How would you rate the usefulness and practical application of this course/workshop to your job?	1	2	3 4 <u>5</u>
8. In general, how would you rate the quality of the instructor and effectiveness of the instruction?	1	2	3 4 <u>5</u>

C. Would you recommend this course to co-workers?

Yes X No \_\_\_\_\_

D. What were the strengths of the course? clear concise suggestions/activities were provided - not the usual "well it all depends on your situation"

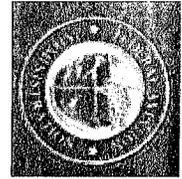
E. What are your recommendations for improvement? \_\_\_\_\_

F. Additional comments? \_\_\_\_\_

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Name (optional) Pam Sullivan Organization A03-320

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates May 1 & 2, 2002

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | (4) | 5   |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | (4) | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4   | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4   | (5) |

C. Would you recommend this course to co-workers?

Yes  No

D. What were the strengths of the course? Gordon has vast knowledge of not only COTS Risk mitigation but also of actual problems encountered within project. He applies these examples throughout the course which allows the student to see the course material as applies in the practical world. The exercise was very using in applying the material

E. What are your recommendations for improvement? I would like this course spread out of 3 days to allow for more details to be discussed.

F. Additional comments?

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Name (optional) Kelly Peterson

Organization ACB-630

# FAA ICIP Course/Workshop Critique



Course/Workshop Name Cots Risk Mitigation Session Dates 5/1 - 5/2

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?

Yes  No

D. What were the strengths of the course?

Allows A process to be followed for documenting problems with a particular system. Showed how to quantify and qualify proposed solutions.

Instead of arm waving and "the sky is falling" tactics a rational quantifiable approach is now known.

E. What are your recommendations for improvement?

Explain how to "MAKE management" UNDERSTAND critical need vs desired changes. How to break through the political process and minimize contractors inputs.

F. Additional comments?

great course! Learned much in a very short time. Will begin work immediately on DARAC presentation.

THANKS!

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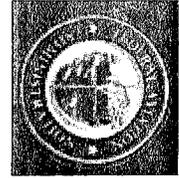
Name (optional)

Jim Wallace

Organization

AOS-320

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MITIGATION Session Dates MAY 1, 2 2002

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?    Yes X    No \_\_\_\_\_

D. What were the strengths of the course? KNOWLEDGE OF INSTRUCTOR, LAYOUT AND FLOW OF SUBJECT

E. What are your recommendations for improvement? A FEW SECONDS OF TIME IN A REVIEW OF "THE GUIDE"

F. Additional comments? OUTSTANDING JOB!

Name (optional) W<sup>m</sup> CONKLIN

Organization ACB-530

# FAA ICIP Course/Workshop Critique



*COTS Risk Mitigation*

Course/Workshop Name *Cheryl Matthews* Session Dates *5/1 to 5/2*

**A. Questions 1-6 (circle one number only please)**

NO   SOMEWHAT   YES

- |  |   |   |   |     |     |
|--|---|---|---|-----|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4   | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4   | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | (4) | 5   |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | (4) | 5   |

**B. Questions 5-8**

LOW   MEDIUM   HIGH

- |   |   |   |   |     |     |
|---|---|---|---|-----|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4   | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | (4) | 5   |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4   | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4   | (5) |

C. Would you recommend this course to co-workers?   Yes    No

D. What were the strengths of the course? *Good technique's covered to mitigate risks -*  
*Good RISK Assessment Strategies*  
*Excellent Tools*

E. What are your recommendations for improvement? *More exercise at each module -*

F. Additional comments? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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Name (optional) *Cheryl Matthews*   Organization *AOS-500*

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS RISK MITIGATION Session Dates 5/1 - 5/2

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?

Yes     No

D. What were the strengths of the course? ADDRESSED CURRENT REAL CONCERNS WITH COTS

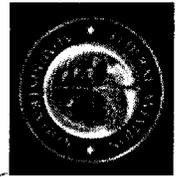
E. What are your recommendations for improvement? DATA WITH FAA PROGRAMS

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_

Organization \_\_\_\_\_

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mgt. Session Dates 12-13 June 02

**A. Questions 1-6 (circle one number only please)**

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

**B. Questions 5-8**

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?    Yes     No

D. What were the strengths of the course? Good sharing of experiences and interchange btwn teacher and students. Also, relationship /-level btwn reality and theory.

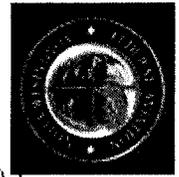
E. What are your recommendations for improvement? \_\_\_\_\_

F. Additional comments? \_\_\_\_\_

Name (optional) \_\_\_\_\_

Organization ASD-770

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk Mitigation Session Dates June 12-13, 2002

**A. Questions 1-6 (circle one number only please)**

NO    SOMEWHAT    YES

- |  |   |   |   |   |          |
|--|---|---|---|---|----------|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | <u>5</u> |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | <u>5</u> |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | <u>5</u> |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | <u>5</u> |

**B. Questions 5-8**

LOW    MEDIUM    HIGH

- |   |   |   |          |   |          |
|---|---|---|----------|---|----------|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3        | 4 | <u>5</u> |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3        | 4 | <u>5</u> |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | <u>3</u> | 4 | 5        |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3        | 4 | <u>5</u> |

C. Would you recommend this course to co-workers?    Yes     No

D. What were the strengths of the course? The instructor, Gordon Saffner is not only very knowledgeable on the subject, but he is also very skilled as an instructor. The materials were very well prepared and thought out. The course exercises at the end were very effective to "seal" the information provided.

E. What are your recommendations for improvement? Add a couple of blank pages to the workbook for additional space for notes.

F. Additional comments? Q#7 - I'm not personally responsible for COTS risk mitigation, but the knowledge I gained in this course will be useful.  
The course was very interesting.

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Name (optional) Terresa Woolley    Organization AUA-200

# FAA ICIP Course/Workshop Critique



Course/Workshop Name Cost Risk Mitigation Workshop Session Dates 6/13/02

**A. Questions 1-6 (circle one number only please)**

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

**B. Questions 5-8**

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?

Yes  No

D. What were the strengths of the course? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E. What are your recommendations for improvement?

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Page 80 Engineering Page 94 Acquisition SP  
Page 138 Fixed NO Rational

F. Additional comments? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

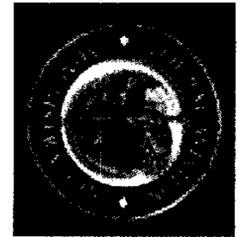
Name (optional)

Michael McVeigh

Organization

ASD-12U

# FAA ICIP Course/Workshop Critique



Course/Workshop Name COTS Risk mgmt Session Dates 6/12-6/13

A. Questions 1-6 (circle one number only please)

NO    SOMEWHAT    YES

- |  |   |   |   |   |     |
|--|---|---|---|---|-----|
| 1. Were the overall course/workshop objectives made clear?                           | 1 | 2 | 3 | 4 | (5) |
| 2. Was there agreement between course/workshop objectives and the material provided? | 1 | 2 | 3 | 4 | (5) |
| 3. Were challenging problems or questions for discussion raised during the course?   | 1 | 2 | 3 | 4 | (5) |
| 4. Were the major points and concepts presented clearly?                             | 1 | 2 | 3 | 4 | (5) |

B. Questions 5-8

LOW    MEDIUM    HIGH

- |   |   |   |   |   |     |
|---|---|---|---|---|-----|
| 5. How would you rate the quality of the material covered and provided?                               | 1 | 2 | 3 | 4 | (5) |
| 6. How would you rate the pacing and speed of the material covered?                                   | 1 | 2 | 3 | 4 | (5) |
| 7. How would you rate the usefulness and practical application of this course/workshop to your job?   | 1 | 2 | 3 | 4 | (5) |
| 8. In general, how would you rate the quality of the instructor and effectiveness of the instruction? | 1 | 2 | 3 | 4 | (5) |

C. Would you recommend this course to co-workers?    Yes     No

D. What were the strengths of the course? The instructor was very thorough

E. What are your recommendations for improvement? blank risk sheets

F. Additional comments?

Name (optional) \_\_\_\_\_ Organization \_\_\_\_\_