

## EMERGENCY RESPONSE FOR THE ATHLETE COURSE EVALUATION

Thank you for your time in completing this course evaluation. The information you provide will help us to improve the course content and monitor the quality of our program.

Name of instructor(s): \_\_\_\_\_

Please identify your primary profession:    ☐ PT   ☐ PTA   ☐ AT   ☐ RN   ☐ Physician   ☐ EMT   ☐ Other (specify)

Please identify any secondary profession(s): ☐ PT   ☐ PTA   ☐ AT   ☐ RN   ☐ Physician   ☐ EMT   ☐ Other (specify)

Are you an SCS?   ☐ Yes   ☐ No

<b>5 = Strongly Agree   4 = Agree   3 = Somewhat Agree   2 = Disagree   1 = Strongly Disagree   NA = Not Applicable</b>						
<b>ONLINE LEARNING</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>N/A</b>
The online textbook enhanced the learning process.						
The written test served as a good indicator of learned knowledge.						
The online learning prepared me for the in-person course.						
<b>IN-PERSON LEARNING</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>N/A</b>
The objectives were clear and were met by the course instruction.						
The facility provided a conducive environment for learning.						
The course instruction was useful in a practical sense.						
Evidence was provided to substantiate the material presented.						
There was adequate practice time to perform skills.						
The course was adequately in-depth to provide me with the skills and knowledge promised by the promotional materials.						
Personal experience and observation were the primary source of information.						
After this course, I have increased confidence to manage cases of acute injury and illness of athletes.						
After this course, I have increased confidence to care for youth and senior athletes with appropriate recommendations for athletic participation.						
After this course, I have increased confidence to describe injury and medical conditions commonly experienced by athletes with disabilities.						
After this course, I have increased knowledge of legal and ethical concerns for the athletic venue and their rules to protect athletes.						
The presentation was free from commercial bias*						
*If you selected numbers 1-3 for the above item, please explain below (did you feel that the product promotion was the sole purpose of the course?).						

THE INSTRUCTOR(S) WAS/WERE...	5	4	3	2	1	N/A
Well-prepared.						
Able to answer questions clearly and thoroughly						
Engaging in the instructional style.						
Able to provide useful feedback.						
Knowledgeable and effectively demonstrated practical applications.						

Additional comments: \_\_\_\_\_

\_\_\_\_\_

**Are you interested in hosting an in-person course? If yes, please provide your contact information below:**

**Full Name** \_\_\_\_\_

**Email Address** \_\_\_\_\_