WOW! Faculty & Staff Development System Feedback
FY '05

Indicate your employee category:

 Full-time Faculty ___ Adjunct Faculty ___ Professional ___ Classified ___

1. If you did not participate in any of the Fall **WOW!** development activities,   indicate below the reason(s):
    a. Nothing was presented at a time that was convenient for me.
    b. I did not realize that the **WOW!** activities were for me.
    c. I was not encouraged to participate.
    d. None of the activities interested me.
    e. I had no time for the **WOW!** development activities.

2. In how many **WOW!** activities did you participate during the fall?
    a. 0
    b. 1-3
    c. 4-6
    d. 6-10
    e. more than 10

3. If you participated in one or more **WOW!** activities this year, describe below how you have applied or plan to apply what you learned.
   _____
   _____
   _____
   _____

4. In what way(s) did your job performance improve as a result of participating in activities that focused on computer-related skills?
   _____
   _____
   _____
   _____

5. In the space below, list any additional activities in which you would participate if they were offered.
   _____
   _____
   _____
   _____

Thank you for taking the time to complete this survey. Please return it to Martha George in the attached Campus Mail envelope before May 13.