Circle your level of agreement for each statement below, with 1 being Strongly Disagree and 4 being Strongly Agree.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Disagree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. By the end of this session I could identify hazards to avoid when entering an Agricultural Confined Space.</td>
<td></td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>2. After attending this session I could describe methods to control hazards associated with Agricultural Confined Spaces.</td>
<td></td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>3. I learned new material on Agricultural Confined Spaces.</td>
<td></td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>4. I felt the information for this training session was well organized.</td>
<td></td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>5. I thought the amount of information presented was appropriate for the time period.</td>
<td></td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>6. I was engaged throughout most of the training session.</td>
<td></td>
<td>1 2 3 4</td>
</tr>
<tr>
<td>7. I found this training session useful and would recommend it to others.</td>
<td></td>
<td>1 2 3 4</td>
</tr>
</tbody>
</table>

Please circle ONE choice and provide an explanation if you select “Other”.

The MOST useful part of this training session was:
- a. Power point presentation
- b. Handouts
- c. Information shared by instructors
- d. Demonstrations and/or group activities
- e. Other _____________________________

The LEAST useful part of this training session was:
- a. Power point presentation
- b. Handouts
- c. Information shared by instructors
- d. Demonstrations and/or group activities
- e. Other _____________________________

3. I would like to see MORE:
- a. Pictures showing the hazards/corrections
- b. Animations/short video clips
- c. Group activities
- d. Group Discussion
- e. Other _____________________________

4. I would like to see FEWER:
- a. Pictures showing the hazards/corrections
- b. Animations/short video clips
- c. Group activities
- d. Group Discussion
- e. Other _____________________________

PLEASE COMPLETE OTHER SIDE.
Circle the ONE category that most closely resembles your current or most recent job duties.

Commercial Elevator Employee  Supervisor/Manager Commercial Elevator
Farmer or farm worker with 11 or more employees  Farmer or farm worker with 10 or fewer employees
IL Farm Bureau Manager or Board Member  Safety Specialist/Coordinator/ Manager/ Director
Extension Educator  Vocational Ag Instructor
Rescue/Emergency Personnel (volunteer or paid)  Other: _____________________________________

I have been in this position ___________ years.

Today's presentation included a variety of safe work practices. Circle ONE statement below which MOST CLOSELY resembles what you plan to do with this knowledge after you leave here.

Please remember this information is anonymous.

a. I plan to increase the amount of safe work practices I follow in my daily work.

b. I plan to decrease the amount of safe work practices I follow in my daily work.

c. I would like to increase the amount of safe work practices I follow in my daily work but do not have the resources.

d. I already follow most of the safe work practices shown in today's presentation on a daily basis.

e. I do not follow most of the safe work practices shown and today's presentation will not change that.

Circle ONE answer for the following:

1. My first (native) language is:  English  Spanish  Other

2. I am:  Male  Female

3. My Age is:  Under 18  18 – 24  25 – 34  35 – 44  45 – 54  55 – 64  Over 64

Please share any other thoughts on this training session or suggested changes here.

Thank you for your feedback!

This material was produced under grant number SH-27664-SH5 from the Occupational Safety and Health Administration, U.S. Department of Labor. It does not necessarily reflect the views or policies of the U.S. Department of Labor, nor does mention of trade names, commercial products, or organizations imply endorsement by the U.S. Government.