**Great Shake Out 10/15/2015** 

## PARTICIPANT FEEDBACK FORM

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our nation against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

Part	l: (	General	Info	rmation
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Name:
Agency/Organization Affiliation:
Position Title:
Years of Experience in Present Position:
Number of Exercises Previously Participated in: 0 1-5 5-10 15+
Exercise Role: Player Facilitator/Controller Observer Evaluator
Location during Exercise:

Please enter your responses in the form field or check box after the appropriate selection.

## **Part II: Exercise Design**

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

Assessment Factor		igly gree			ongly Agree
Pre-exercise briefings were informative and provided the necessary information for my role in the exercise.	1	2	3	4	5
The exercise scenario was plausible and realistic.	1	2	3	4	5
Exercise participants included the right people in terms of level and mix of disciplines.	1	2	3	4	5
Participants were actively involved in the exercise.	1	2	3	4	5
Exercise participation was appropriate for someone in my field with my level of experience/training.	1	2	3	4	5
The exercise increased my understanding about and familiarity with the capabilities and resources of other participating organizations.	1	2	3	4	5
The exercise provided the opportunity to address significant decisions in support of critical mission areas.	1	2	3	4	5
After this exercise, I am better prepared to deal with the capabilities and hazards addressed.	1	2	3	4	5

## **Part III: Participant Feedback**

1. I observed the following strengths during this exercise (please select the corresponding capability and applicable element related to the strength):

Strengths	Core Capability	Element
	Operational Coordination	Planning Organization Equipment Training Exercise
	Critical Transportation	Planning Organization Equipment Training Exercise
	Public Information & warning	Planning Organization Equipment Training Exercise

2. I observed the following areas for improvement during this exercise (please select the corresponding capability and applicable element related to the area for improvement):

Areas for Improvement	Core Capability	Element
	Operational Communication	Planning Organization Equipment Training Exercise
	Mobilization Demobilization	Planning Organization Equipment Training Exercise
	OTHER	Planning Organization Equipment Training Exercise

3. What specific training opportunities helped you (or could have helped you) prepare for this exercise? Please provide specific course names if applicable.

4. Training	5. Complet ed Prior to Exercise ? (Y/N)
6.	7.
8.	9.
10.	11.
12.	13.
14.	15.

- 16. Which exercise materials were most useful? Please identify any additional materials or resources that would be useful.
  - **17.**
  - **18.**
  - **19.**
  - 20.
  - 21.
  - 22.
  - 23.
  - 24.
  - **25.**
  - **26.**
- 27. Please provide any recommendations on how this exercise or future exercises could be improved or enhanced.