**IEEE Continuing Education Course Evaluation**

**Course Title: TCRP C24 Transit Traction Power Cables: Replacement Guidelines Event Date: January 14, 2022**

**Sponsor: IEEE VTS Philadelphia Chapter Instructor(s) Dr. Kasim Korkmaz**

Please indicate the extent to which you disagree or agree with the following statements:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree  1 | 2 | 3 | 4 | 5 | **Strongly Agree**  6 |
| A. The course material was organized clearly and logically. |  |  |  |  |  |  |
| B. The objectives of the course were satisfied. |  |  |  |  |  |  |
| C. The technical content was appropriate. |  |  |  |  |  |  |
| D. My knowledge on the topic increased to a level that made attendance worthwhile. |  |  |  |  |  |  |
| E. The instructor's speaking voice was clear and easy to understand. |  |  |  |  |  |  |
| F. The instructor clearly explained difficult concepts. |  |  |  |  |  |  |
| G. The length of the course was about right. |  |  |  |  |  |  |

**The following course assessment must be completed in order to qualify for your PDH Certificate.**

|  |
| --- |
| Please list two major topics from this course: |
| What one topic from this course did you find most helpful to your job and why? |
| Briefly summarize what this course was about in one or two sentences. |
| What was the primary reason that you took this training? |
| Do we have permission to use your comments in course marketing materials? **Yes/No** |

Please complete the following information to ensure your receipt of the professional development hours (PDHs):

Name (as you would like it to appear on PDH Certificate):

## E-Mail:

**PLEASE RETURN THIS FORM TO** [**brandon.swartley@ieee.org**](mailto:brandon.swartley@ieee.org)

**TO BE FORWARDED TO IEEE EDUCATIONAL ACTIVITIES STAFF.**