

SAMPLE L3 & L4 Survey for Managers

Welcome

The INSERT DIVISION/AGENCY appreciates your time in completing this survey. Your feedback helps us to improve the quality of courses offered as part of the INSERT PROGRAM/SESSION NAME your employee recently completed.

The purpose of this survey is to assess your observation of changes in your employee's behavior as a result of their recent completion of INSERT PROGRAM. We will use your feedback to make improvements in the program. We anticipate the survey should take five (5) minutes to complete. Thank you for your feedback.

SAMPLE L3 & L4 Survey for Managers

Course Logistics

1. INSERT COURSE LOGISTICS

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Behavior

* 2. The purpose of this question is to evaluate your level of support for each of the following factors in assisting your employee in the effective transfer of knowledge gained in the classroom to their role as a supervisor:

	1 = Not at all	2 = 1 to 5 times	3 = Weekly	4 = Bi-monthly
Discussed expectations of what application is to be achieved before course completion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discussed expectations of what application is to be achieved after course completion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discussed how to apply knowledge gained in a practical setting.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Supported and/or encouraged employee while attempting application of new skills.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Coached and redirected employee in application of acquired skills in their role as a supervisor.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provided adequate system of accountability in place for the application of employee's transfer of knowledge into behavior.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discussed how to support your employee's Lead Ohio: Inspirational Leaders Personal Development Plan.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other contributing factors (please explain)

3. What else would have improved your employee's ability to transfer the knowledge gained into behavior change in their role as a supervisor?

Results/Impact

* 4. Rate the level of increase your employee has achieved in each of the competency focus areas:

	1 = Not at all	2 = Low	3 = Medium	4 = High
Coaching and Developing Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communicating with Supervisors, Peers and Subordinates	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Establishing and Maintaining Interpersonal Relationships	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Guiding, Directing and Motivating Subordinates	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Making Decisions and Solving Problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Resolving Conflicts and Negotiating with Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other areas of increased ability (please explain)

* 5. Rate the level of support you provided your employee in developing each of the competency focus areas:

	1 = Not at all	2 = Low	3 = Medium	4 = High
Coaching and Developing Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communicating with Supervisors, Peers and Subordinates	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Establishing and Maintaining Interpersonal Relationships	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Guiding, Directing and Motivating Subordinates	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Making Decisions and Solving Problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Resolving Conflicts and Negotiating with Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other areas of support (please explain)

* 6. Rate the level of impact your employee has achieved as a result of applying what they learned:

	1 = Not at all	2 = Low	3 = Medium	4 = High
Increased ability to develop goals that align to agency strategic initiatives	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased ability to coach their direct reports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased ability to evaluate employee performance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased productivity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased customer satisfaction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increased engagement with their team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other areas of increased ability (please explain)

7. Please add any personal examples of increased abilities.

* 8. Rate the level of impact your organization has achieved as a result of your employees participation in the course:

	1 = Disagree	2 =	3 =	4 = Agree
This course has positively impacted their ability to supervise their employees.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This course has enabled them to positively impact the strategic initiatives of our agency.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
This course has enabled them to positively impact their relationships with our agency's primary customers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other impact(s) to your agency (please explain)

9. How can this program be improved to better support your supervisors in achieving your agency's strategic initiatives?

Thank you for taking time to provide your feedback.

INSERT CONTACT INFO