



CMMI Training: Process Improvement Background Questionnaire Systems Engineering / Software - Continuous Representation

This document contains questions about your background and experience in systems engineering, software, and process improvement. We will use the answers that you and others provide to assist the instructors in their teaching during the upcoming CMMI training course.

Please read and answer all of the questions. Feel free to write in the margins if you wish to comment on any questions or qualify your answers.

The information that you provide will be held in strict confidence. We ask for your name for administrative purposes only.

Thank you for your help.

CMMI Product Development Team

Your Name: *(Please Print Neatly)* _____

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1 What type of work do you do? *(Please mark as many as apply)*

- | | |
|---|---|
| <input type="checkbox"/> PROJECT LEADER
<input type="checkbox"/> PRACTITIONER
<input type="checkbox"/> OTHER <i>(Please describe briefly)</i> | <input type="checkbox"/> MANAGER
<input type="checkbox"/> SOFTWARE ENGINEERING PROCESS GROUP (SEPG) MEMBER |
|---|---|

2 Approximately how often have you worked in each of the following areas during the past year?
(Please check one box for each category -- May total to more than 100%)

	NEVER <i>(0%)</i>	RARELY <i>(<20%)</i>	ON OCASSION <i>(20-50%)</i>	REGULARLY <i>(>50%)</i>
Systems engineering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Software development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Software and/or system acquisition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Process improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3 Do you work primarily in: *(Please mark one box)*

- | | |
|---|---|
| <input type="checkbox"/> SOFTWARE DEVELOPMENT
<input type="checkbox"/> SOFTWARE MAINTENANCE / ENHANCEMENT / POST DEPLOYMENT SUPPORT / SUSTAINING ENGINEERING | <input type="checkbox"/> SYSTEMS ENGINEERING
<input type="checkbox"/> OTHER <i>(Please describe briefly)</i> |
|---|---|

4 How much software experience have you had throughout your career?

(Please specify an approxmate number rounded to the nearest year for each category)

- In your present organization _____ YEARS
- Overall experience _____ YEARS
- Systems engineering _____ YEARS
- Software development _____ YEARS
- Process improvement _____ YEARS

5 How many years of formal education have you completed past high school?
(Please specify an approximate number rounded to the nearest year)

_____ YEARS

What was your major field of study? *Please Specify*

6 Have you participated in a previous systems engineering or software process appraisal(s)?
(Please mark one box)

NO \longrightarrow *(Please continue with question 3 on the next page)*

YES \searrow

Approximately how many? *(Please specify for each)*

<u>NUMBER</u>	<u>YEAR OF MOST RECENT</u>
_____	19 _____
Assessments based on the Systems Engineering Capability Model (EIA 731)	
_____	19 _____
CBA IPis -- CMM Based Appraisals for Internal Process Improvement	
_____	19 _____
Other appraisal methods <i>(Please describe briefly)</i>	

7 How would you rate your familiarity with each of the following? *(Please check one box for each)*

	<u>NEVER HEARD OF IT</u>	<u>HEARD OF IT</u>	<u>HAVE USED IT ON OCCASION</u>	<u>USE IT REGULARLY</u>
The concept of total quality management...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The concept of statistical process control ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Software CMM, Version 1.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Software CMM, Version 2.0 Draft C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Systems Engineering Capability Model, EIA731, Draft Version 1.0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPD CMM, Version 0.98	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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