## COS70004 Pre-Evaluation Questionnaire

Project Name: TrackCare
Team code: CL03\_T3
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\* Required

## Instructions

The purpose of this questionnaire is to find out a few things about you. This will help us interpret our results. Please tick the option that best describes you.

1.	. Participant ID *
	(ID will be provided)
2.	. What is your gender? *
	(Please select one answer)
	C Female
	O Non-binary
	Prefer not to say

3. Which of the following includes your age? *  (Please select one answer)
O 18-24
O 25-34
35-49
O 50-64
65-74
75-79
O 80+
Prefer not to say
4. Do you care for someone with dementia or an elderly person)? * (Please select one answer)
Yes
○ No
I do not directly care but receives information from caregiver
5. Do you have experience using GPS tracking systems (e.g., tracking apps such as Find My, Life360 etc.)? *
(Please select one answer)
Yes, i have
No, i haven't
6. Do you have experience using mobile applications for healthcare purposes (e.g., communicating with healthcare providers such as HotDoc app)? *
(Please select one answer)
Yes
○ No
O Not sure

/. Would you be interested in using a system like TrackCare to monitor the location of someone under your care? *  (Please select one answer)
Yes
○ No
○ Maybe

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