## USER EVALUATION OF A WEARABLE SENSOR GLOVE

1: The wearable glove is comfortable to wear.										
Strongly disagree	1	2	3	4	5	6	7	Strongly agree		
2: What d	id you like	e about w	earing the	e wearable	sensor glo	ove?				
3: What d	o you disl	ike about	wearing t	the wearab	le sensor g	glove?				
4: I would feel comfortable wearing the wearable sensor glove at home/office.										
Strongly disagree	1	2	3	4	5	6	7	Strongly agree		
5: What d	o you thin	ık are the	potential	benefits of	wearing t	this device	e at home /	office?		
			<del></del>		- ,	2.70				
6: Do you concerns?		concern v	wearing th	his device	at home/or	ffice? If s	o, what ar	e your		
			_	_	_	_	_	_		

1 month)			C			C		d periods of tin
Strongly lisagree	1	2	3	4	5	6	7	Strongly agree
3: What dof time (1			he potenti	al benefit	s of weari	ng this de	vice for pr	olonged period
	- · · /							
9: Do vou	have a	ny conce	rns wearin	σ this des	vice for nr.	olonged n	eriods of t	ime (1 month)?
so, what a					100 TOT pr			