**[INSERT SURVEY TITLE]**

Prepared By: [SPECIFY THE NAME]

|  |  |
| --- | --- |
| Name (Optional): | nameValue |
| Age: | ageValue |
| Gender: | genreValue |
| Address: |  |
| Contact Number: |  |

Date of Survey: 00.00.20 [ ]

1. I discovered [SPECIFY THE NAME OF THE PRODUCT] through [ ].

2. I use the product at least [ ] times in a month.

3. I am [ ] with the product. (State if satisfactory or not)

4. The product is [ ] in my daily activities. (State if helpful or not)

5. My purpose of using the product is [ ].

6. The product is [ ]. (State if effective or not)

7. I am likely to [ ] this product. (State if you will buy the product or not)

8. If given the chance, I would like to change the [ ]. (State the kind of change you want with the product)

**Thank you for answering this survey!**