

Exit Survey - Subject ID: randomID

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**Subject Information**

Subject ID:  Age:

Gender: ☐ Male ☐ Female ☐ Other Major:

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1. Do you own a personal computer (eg: Desktop, Laptop, Netbook, Tablet, etc)?

☐ Yes ☐ No

2. How much time do you spend on a computer each week?

☐ 0 to 1 hours ☐ 21 to 30 hours

☐ 1 to 5 hours ☐ 31 to 40 hours

☐ 6 to 10 hours ☐ 41 to 50 hours

☐ 11 to 20 hours ☐ More than 50 hours

3. Have you used gestural controllers before (eg: Xbox Kinect, Leap Motion, etc) or any other gesture devices?

If yes, please indicate the type of device.

☐ Yes (please list devices):

☐ No

4. Have you used touch devices before (eg: iPad, Surface, Smartphone, Laptop, etc)?

If yes, please indicate the type of device.

☐ Yes (please list devices):

☐ No

5. Have you used a swipe-based keyboard before on any device (eg: Android, Surface, etc)?

If yes, please indicate the type of device.

☐ Yes (please list devices):

☐ No

6. Do you have any physical impairment that makes it difficult to use a computer?

If yes, please indicate the impairment.

☐ Yes (please list impairment):

☐ No

7. Which is your dominant hand?

☐ Right hand ☐ Left hand ☐ Ambidextrous

8. Which hand did you use in today's experiments?

☐ Right hand ☐ Left hand ☐ Both hands

9. Please rank the keyboards from most preferred (1), to least preferred (7).

Controller Keyboard:

Tablet Keyboard:

Leap Surface Keyboard:

Leap Air Static Keyboard:

Leap Air Pinch Keyboard:

Leap Air Dynamic Keyboard:

Leap Air Bimodal Keyboard:

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