

Appendix B: Participant Profile Questionnaire

B.0 Participant Information (to be filled by moderator)	
B.0.1 Participant ID: <u>3</u>	B.0.2 Session date: <u>09-APR-2025</u> <small>/DD-MMM-YYYY/</small>
B.1 Demographics	
<p>1. Age: <input type="checkbox"/> Under 18 <input type="checkbox"/> 18-24 <input checked="" type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55+</p> <p>2. Gender: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary <input type="checkbox"/> Prefer not to say <input type="checkbox"/> Other: _____</p> <p>3. Occupation or study area: <u>Sortation Operative</u></p> <p>4. Highest level of education completed: <input type="checkbox"/> Secondary school <input type="checkbox"/> College/Apprenticeship <input checked="" type="checkbox"/> Undergraduate degree <input type="checkbox"/> Postgraduate degree <input type="checkbox"/> Other: _____</p>	
B.2 Technology use	
<p>5. On average, how many hours per week do you use a computer or laptop? <input type="checkbox"/> Less than 5 hours <input type="checkbox"/> 5-10 hours <input checked="" type="checkbox"/> 11-20 hours <input type="checkbox"/> Over 20 hours</p> <p>6. How would you personally rate your overall computer proficiency? <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input checked="" type="checkbox"/> Advanced <input type="checkbox"/> Expert</p>	
B.3 Familiarity With the System and Its Alternatives	
<p>7. How often do you create websites? (e.g., for work or study) <input type="checkbox"/> Never <input checked="" type="checkbox"/> Rarely <input type="checkbox"/> Occasionally <input type="checkbox"/> Frequently <input type="checkbox"/> Very often</p> <p>8. Which of the following website-making tools have you used before? (Tick all that apply) <input type="checkbox"/> Wix <input type="checkbox"/> Weebly <input type="checkbox"/> Squarespace <input type="checkbox"/> Gatsby <input type="checkbox"/> Webflow <input type="checkbox"/> Other (please specify): _____</p> <p>9. If you have used Wix before, how frequently? <input checked="" type="checkbox"/> Never used it <input type="checkbox"/> Tried it once <input type="checkbox"/> Occasionally use <input type="checkbox"/> Use it regularly <input type="checkbox"/> Use it for every website I make</p> <p>10. Optional: When was the last time you used it? _____</p> <p>11. Do you have any experience with other design tools (e.g., Figma, Canva, Photoshop)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>12. Optional: If the answer to 11. is Yes, could you list which ones and how confident you are using them: <u>Photoshop & GIMP, Moderately Confident</u></p>	
B.4 Usability Testing Context	
<p>13. What device are you completing this test from? OS: <u>Windows 11</u> Brand and model: <u>Surface Pro 9</u></p>	<p>14. Do you use assistive technologies? <small>(e.g., screen readers, zoom tools, keyboard navigation)</small> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes – please specify: _____</p>