

# Kangerluk UX feedback

Thank you for participating in our meeting!

We want to hear your feedback so we can improve and adjust the application to your specifications. Please fill this quick survey and let us know your thoughts (your answers will be anonymous).

**\*Required**

1. How did you find it navigating around the app? \*

*Mark only one oval.*

	1	2	3	4	5	
Difficult to navigate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Easy to navigate

2. What is your impression of the overall layout? \*

*Mark only one oval.*

	1	2	3	4	5	
Confusing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Efficient

3. Did you like the suggested progression structure? (Unlockable levels/difficulty/categories)



*Mark only one oval.*

☐ Yes

☐ No

4. What was the feature you liked the most, and why?

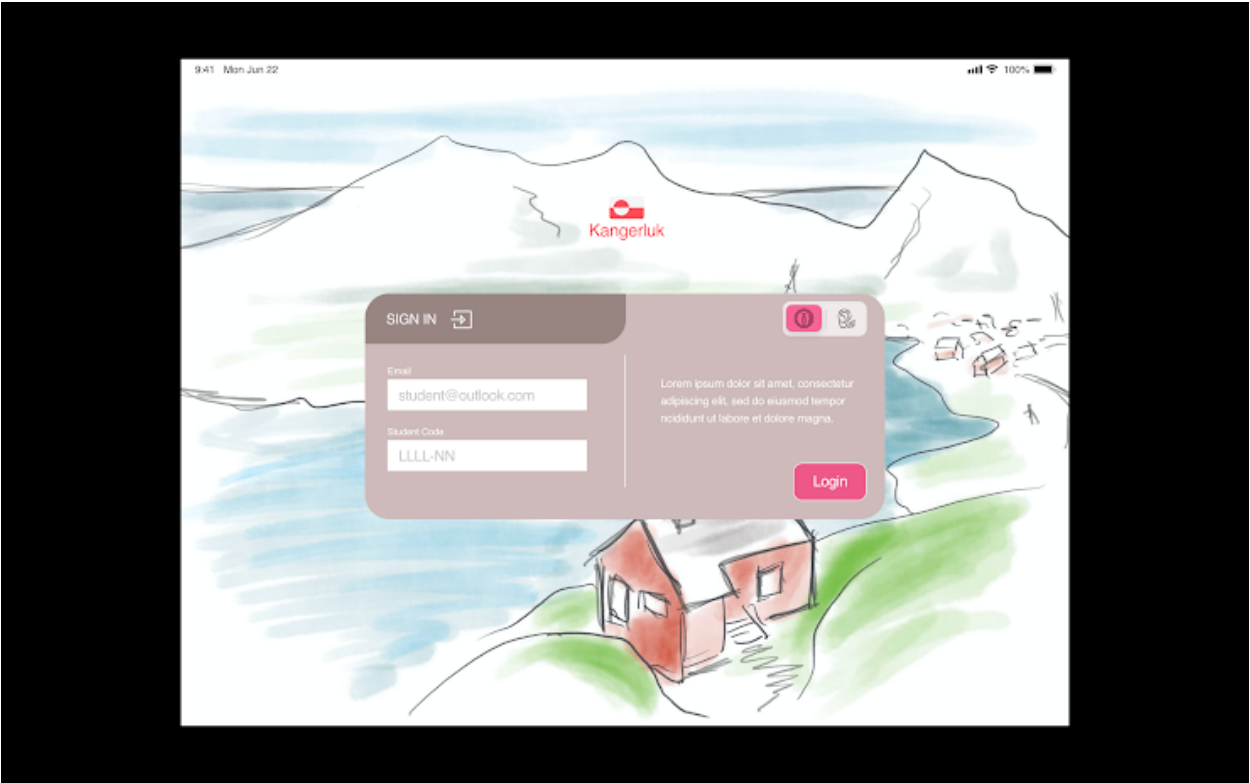
5. What was the feature you liked the least, and why?

Features

In this part you get the chance to freely write your thoughts and suggestions on a number of features.

What are your thoughts on the following?

- 6. Student code w/o email login (codes could be reused over time, alternatively be tied to a specific email, name or username)



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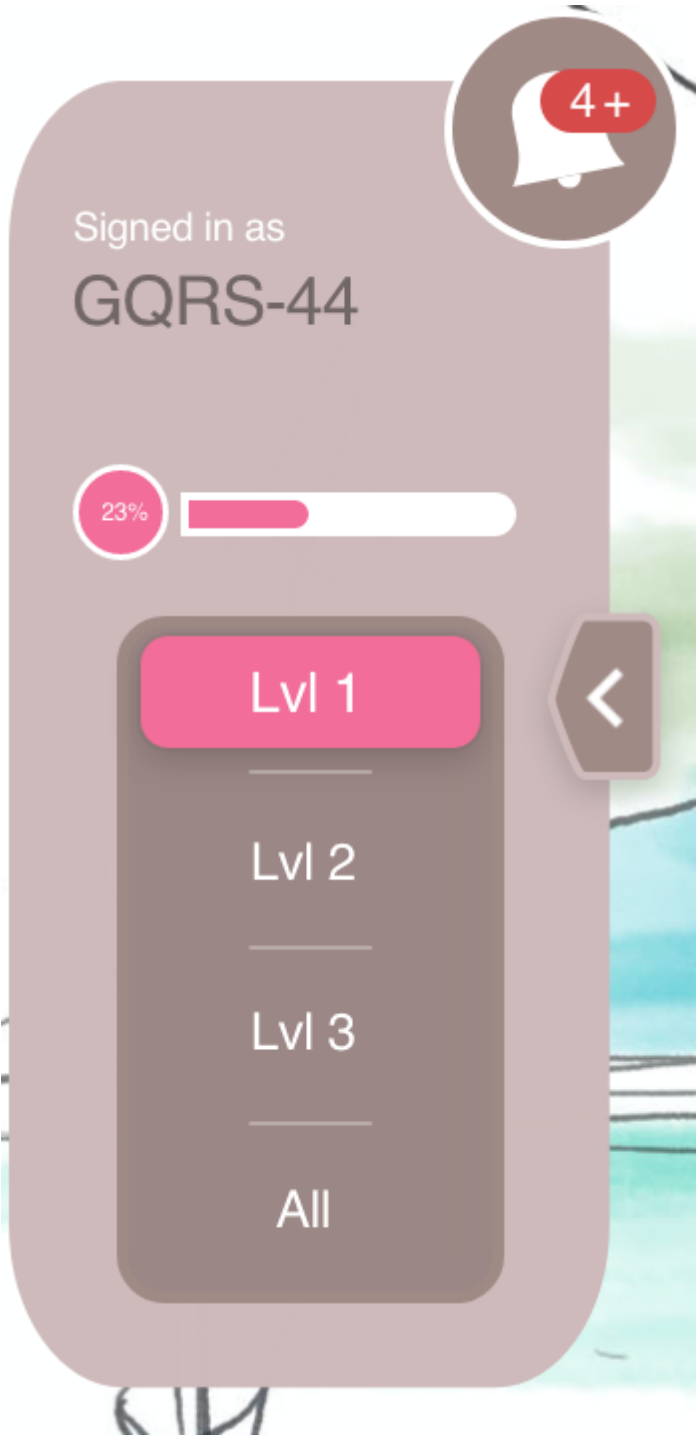
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7. Task sorting (by topic, difficulty, name) \*



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8. Navigating between chapters \*



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9. Filtering tasks \*



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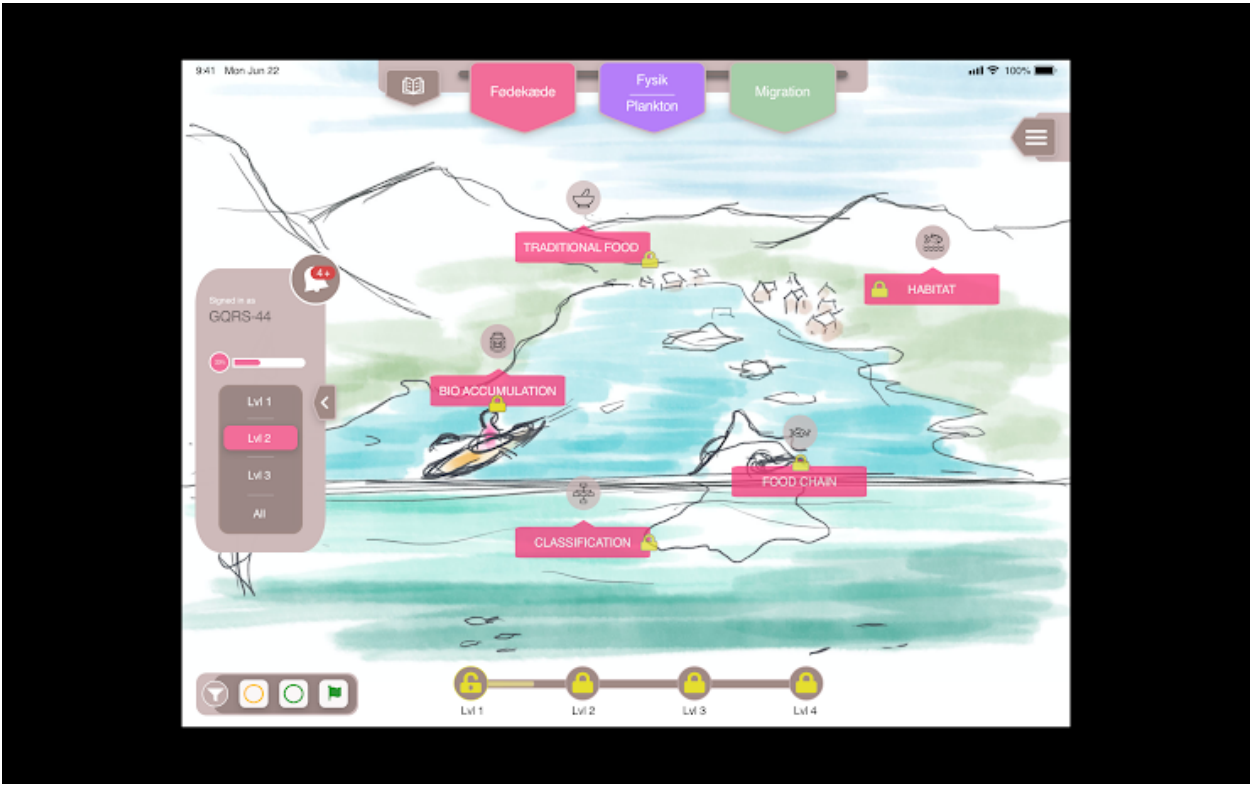
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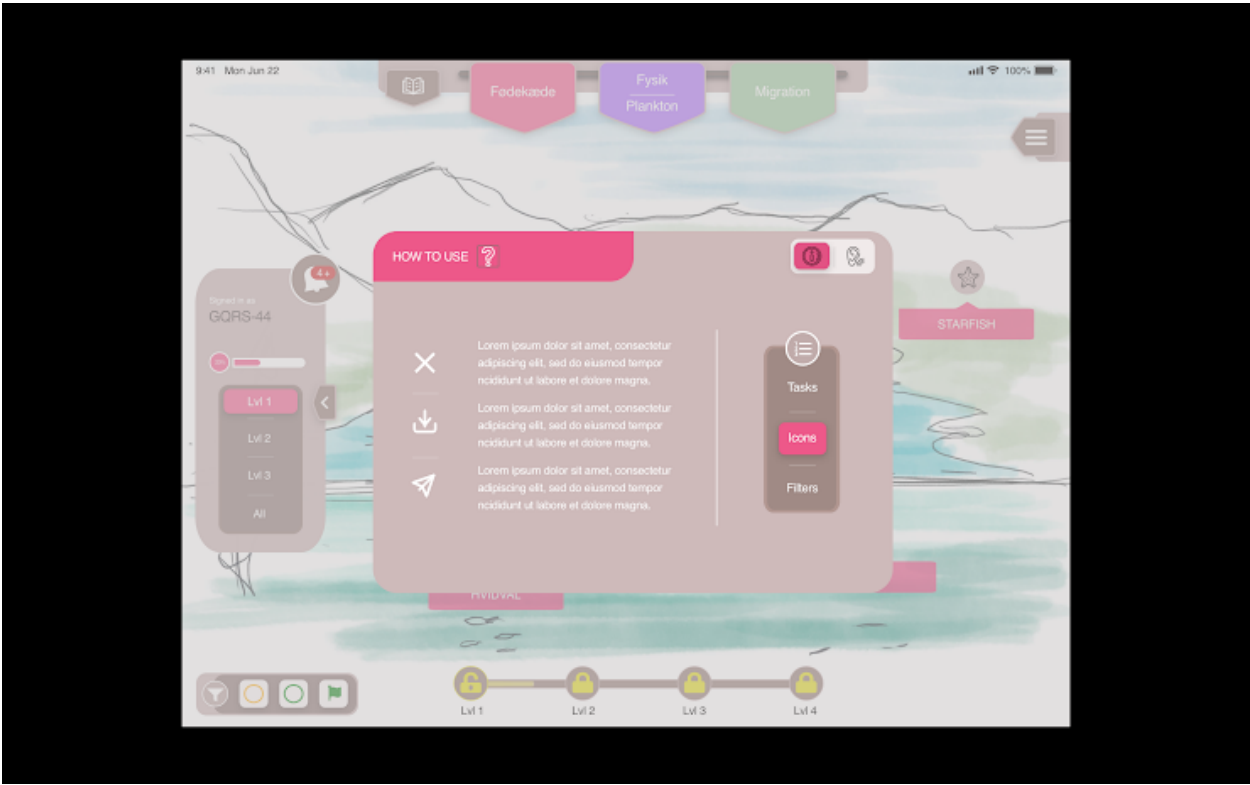
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10.   Unlockable tasks/assignments \*



11. Guide \*



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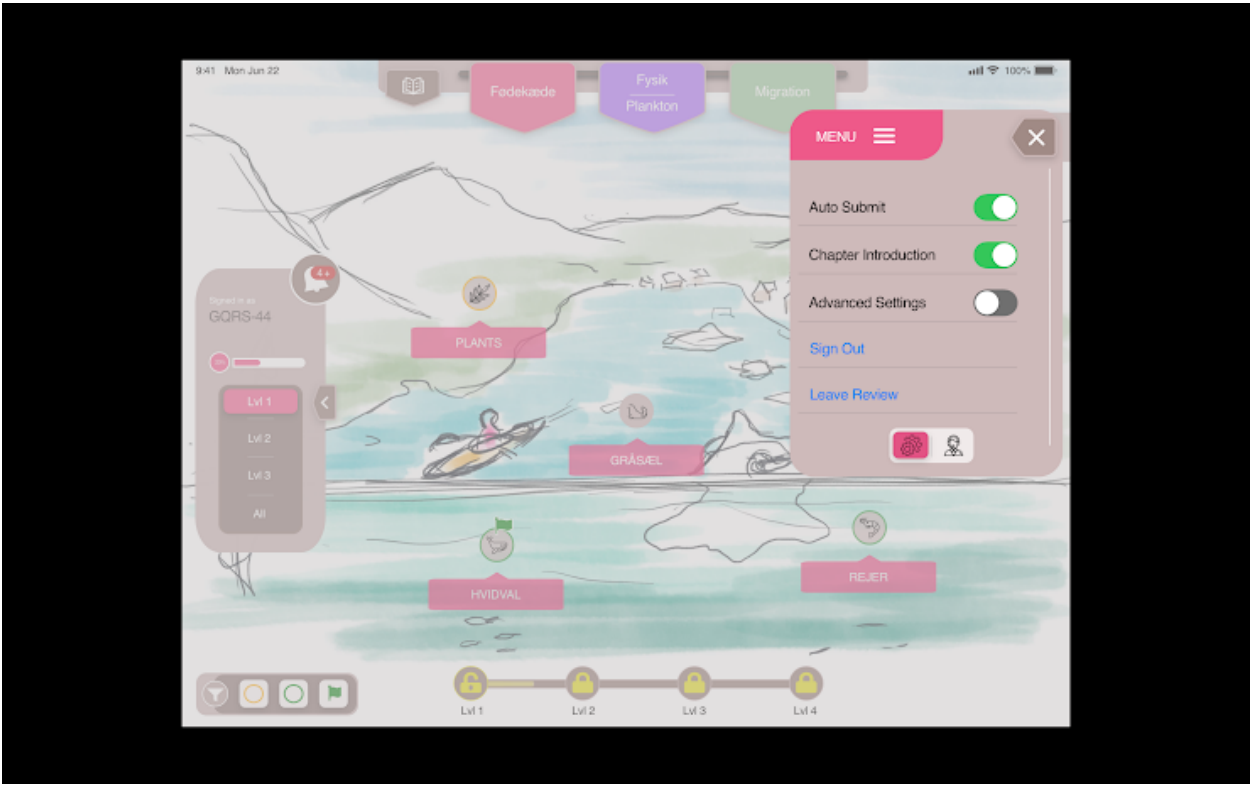
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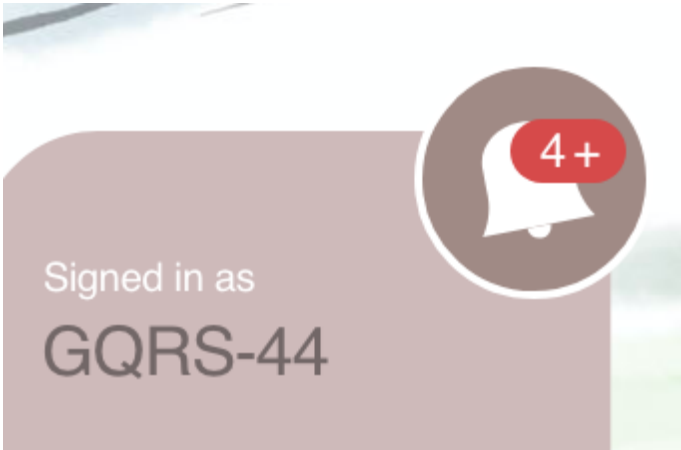
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12. Menu \*





13. Notifications/Messages \*



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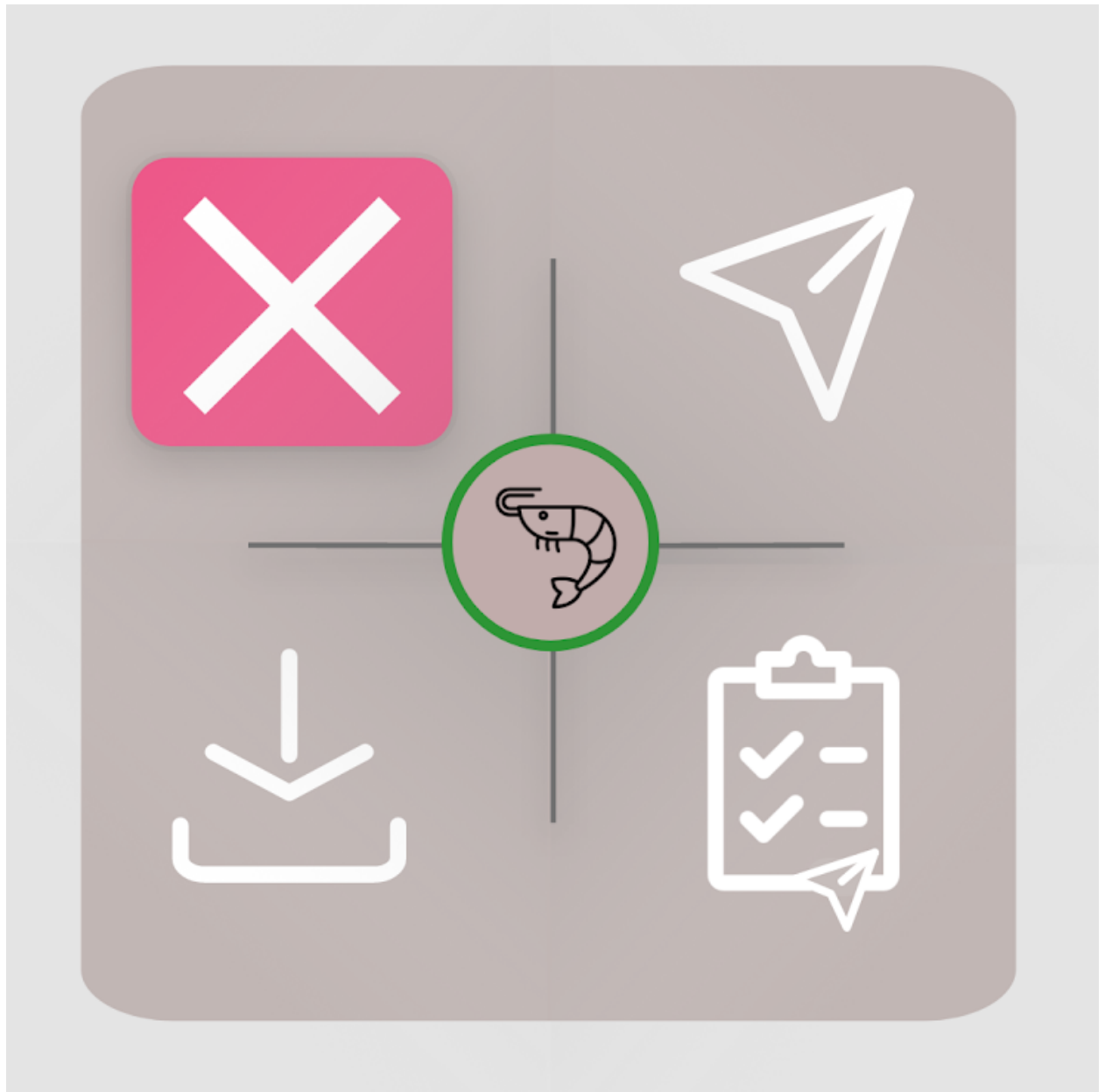
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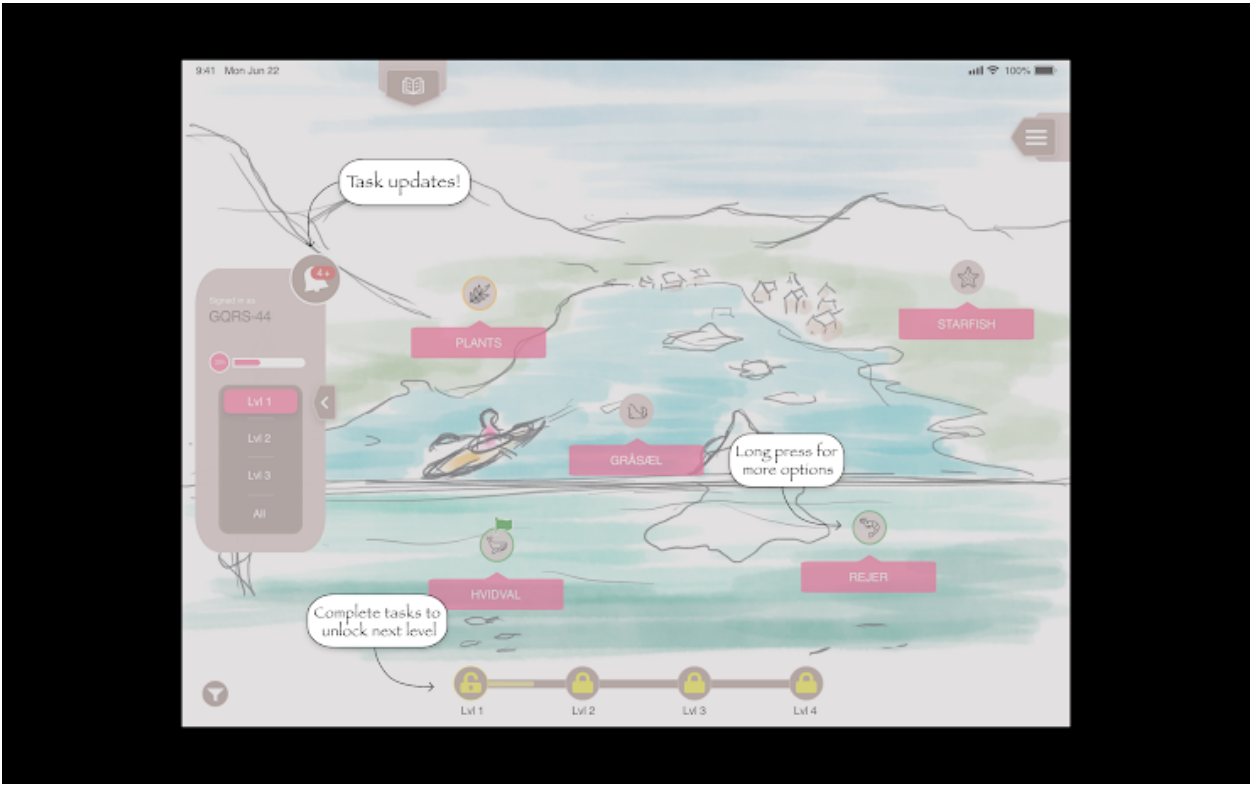
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## 14. Long press menu \*



15. Hints \*



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## 16. Submit \*

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## The finishing touch

## 17. How did you find the overall user experience?

Mark only one oval.

	1	2	3	4	5	
Poor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very intuitive

## 18. Anything you would like to remove/add to improve the overall user experience and navigation?

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19. Any additional comments or suggestions?

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20. Name (optional)

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