

1. Tested method:

Mark only one oval.

- ☐ Screen fade
- ☐ Object fade
- ☐ Camera collider
- ☐ Camera push-back

2. How much each symptom below is affecting you right now?

Mark only one oval per row.

	None	Slight	Moderate	Severe
General discomfort	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fatigue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Headache	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Eye strain	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty focusing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Salivation increasing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sweating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nausea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty concentrating	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
"Fullness of the Head"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Blurred vision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dizziness with eyes open	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dizziness with eyes closed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Vertigo	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stomach awareness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Burping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Please rate your sense of being in the virtual environment, on the following scale from 1 to 7, where 7 represents your normal experience of being in a place.

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[illegible]

4. To what extent were there times during the experience when the virtual environment was the reality for you?

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	1	2	3	4	5	6	7	
At no time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Almost all the time

5. When you think back to the experience, do you think of the virtual environment more as images that you saw or more as somewhere that you visited?

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	1	2	3	4	5	6	7	
Images that I saw	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Somewhere that I visited

6. During the time of the experience, which was the strongest on the whole, your sense of being in the virtual environment or of being elsewhere?

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1 2 3 4 5 6 7

Being elsewhere Being in the virtual environment

7. Consider your memory of being in the virtual environment. How similar in terms of the structure of the memory is this to the structure of the memory of other places you have been today? By 'structure of the memory' consider things like the extent to which you have a visual memory of the virtual environment, whether that memory is in colour, the extent to which the memory seems vivid or realistic, its size, location in your imagination, the extent to which it is panoramic in your imagination, and other such structural elements.

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[illegible]

8. During the time of your experience, did you often think to yourself that you were actually in the virtual environment?

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	1	2	3	4	5	6	7	
Not very often	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Very much so

9. Rate the tested method with the following usability factors. Use the scale from 1 to 5, where 1 represents “not at all” and 5 represents “very much”.

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	1	2	3	4	5
Difficulty in understanding the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Difficulty in operating the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling of being in control while using the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Required effort to use the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling of tiredness while using the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling of enjoyment while using the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling of being overwhelmed while using the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling of frustration while using the method	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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