

QUESTIONNAIRE

Dear user, thank you for taking part in our refactoring tool experience activity. Now we invite you to fill in this experience questionnaire. Your answer is very important for us to collect real data and draw correct conclusions. Please be sure to fill in truthfully. The questionnaire will be anonymous. Please express your true thoughts. Thank you very much for your warm participation. I wish you a happy life and all the best!

1. Would you apply the first refactoring tool?

☐Absolutely Yes ☐Yes ☐Maybe ☐No ☐Definitely Not

2. Would you apply the second refactoring tool?

☐Absolutely Yes ☐Yes ☐Maybe ☐No ☐Definitely Not

3. Would you apply the third refactoring tool?

☐Absolutely Yes ☐Yes ☐Maybe ☐No ☐Definitely Not

4. Would you apply the fourth refactoring tool?

☐Absolutely Yes ☐Yes ☐Maybe ☐No ☐Definitely Not

5. Would you apply the fifth refactoring tool?

☐Absolutely Yes ☐Yes ☐Maybe ☐No ☐Definitely Not