Name: Student ID: Gender: Age:

Dominant hand:□Left □Right Length of thumb: \_\_\_\_\_\_mm

1. **QWERTY keyboard:** □1-No skill □2 □3 □4 □5-Expert
2. **Gesture typing:**  □1-No skill □2 □3 □4 □5-Expert
3. **Type in daily life**: □One index finger □one thumb □two thumbs

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Speed**  (5-Fast 1-Slow) | **Accuracy**  (5-High 1-Low) | **Fatigue**  (5-Not Tired  1-Tired) | **Preference**  (5-Like 1-Dislike) |
| Non G-Start |  |  |  |  |
| G-Start |  |  |  |  |

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