SP24 - The Effects Of Virtual Reality Immersion On Retaining Language

This survey is designed to accurately gather information, measure the opinions, experiences and behaviors of the potential research participants **BEFORE** the potential participant accepted into the study. By filling out this survey, you consent to us using your information as part of our research assignment.

* Indicates required question		
1.	What is your name? (First and Last) *	
2.	Which devices do you use reguarly? (Select all that apply)	
	Check all that apply.	
	Smartphone	
	Laptop	
	Tablet Desktop Computer	
	Smart Watch	
3.	How often do you use virtual reality headsets?	
	Mark only one oval.	
	Never	
	Rarely	
	Occassionally	
	Frequently	
	Very Frequently	

4.	If applicable, have you ever experienced any side effects or discomfort while using virutal reality? Otherwise, leave blank.
	Mark only one oval.
	Yes
	◯ No
5.	If applicable, which type of virtual reality experiences have you tried? Otherwise, leave blank. (Select all that apply)
	Check all that apply.
	Games
	Simulations
	Educational
	Travel
	Social
	Other:
6.	How many languages do you currently speak?
	Mark only one oval.
	<u> </u>
	2
	3
	4 or more

7.	Which methods have you used to learn a new language? (Select all that apply)
	Check all that apply.
	Language Classes
	Language Apps
	Language Exchange Programs
	Self-Study Materials
8.	How much experience do you have with the Nepali, Indo-European, Indo-Iranian, or
	Indo-Aryan Languages.
	Mark only one oval.
	None
	Some
	A lot
9.	What is your age group?
	Mark only one oval.
	Under 18
	18-25
	26-35
	36-45
	46-55
	Over 55

10.	What is your gender?
	Mark only one oval.
	Male
	Female
	Non-Binary
	Prefer not to say

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