User Experience Survey

Survey to be completed after finishing corresponding non-functional testing

1. **Appearance Question**

   How was the feel of the application?

   Mark only one oval.

	1	2	3	4	5	
Uncomplicated	◯	◯	◯	◯	◯	Complicated

2. **Operational Question**

   How was the installation of the application?

   Mark only one oval.

	1	2	3	4	5	
Simple	◯	◯	◯	◯	◯	Difficult

3. **Cultural Question**

   Is the graphics or terms included appropriate?

   Mark only one oval.

	1	2	3	4	5	6	7	8	9	10	
Inapproptaie	◯	◯	◯	◯	◯	◯	◯	◯	◯	◯	Appropriate

4. **Health Question**

   Do the colours or graphics used in the application cause any health concerns?

   Tick all that apply.

   ☐ Yes
   ☐ No

5. **Health Question**

   Are the colours too bright?

   Mark only one oval.

   ◯ Yes
   ◯ No