

Usability Test Plan - Greeting and Consent

Greeting Script

HiOana..... My name is **Stefana** and i'm working at the **Nutrics Company**. Nutrics Company's goal is to improve the day by day life of the persons with diabetes by providing an application which recommends recipes based on the glycemic index. Today we are looking for ways to improve the user experience of the **Nutrics application**. This test is devised to evaluate with specific design components of the **Nutrics application** and to discover any issues we need to address, we are not testing you.

Please speak all your thoughts aloud as you go through the tasks. This helps us better understand why you are making certain choices.

If you find something difficult to use, chances are that others will as well. The study will take about **20 minutes**. We will answer any questions you have at the end of the study.

Before we start you need to sign the Consent Form.

Are there any questions regarding this test?

Let us begin the test.

Statement of Informed Consent

Nutrics Company is conducting feedback sessions in order to understand any problem areas for **Nutrics application**. The information obtained in this test will be used to improve the design and development of user interface components and other deliverables.

I understand that my participation will be recorded on digital audio and that I will be photographed. I understand that data and information I share today will be handled confidentially and anonymously.

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My personal information will be protected; taking part in this study and the results from the study are not part of my performance review. My information will be rolled up with the rest of the data from the other study participants. The audio recordings and photographs may be part of information presented at professional conferences.

I waive any right that I may have to inspect or approve the final recordings, photos and report. I discharge **Nutrics Company** from any liability for making, editing or using the recordings and photographs from this study according to the uses outlined above.

I have read the above project description. I agree with the terms and hereby consent to participate in the study.

Participant Signature:

Participant Name: OANA ZOSIM

Date: 27.05.2019

Usability Test Plan - User Background Information

Background questionnaire

Name: QANA ZOSIM
Title: STUDENT
Company: FEAA
Location: IAS
Current Job: STUDENT

Questions

Ask a few questions to establish to which persona type this user belongs to. Questions relevant to his technology Level, frustrations, products/applications he has user, disabilities etc.

Do you have any of these products? (Mark all that apply)

Cell phone, PDA, Laptop, Desktop, Ipod, Desktop; Other _____

How often do you do these activities?

Activity	Never	Once per month	Once per week	Once per day	Several Times a day
Run/Go to gym/Exercise		✓			
Eat sugar (chocolate, fruits, soda)				✓	
Drink water					✓
Activities that put you in a happy mood			✓		