

**P001**

## Data Protection Information and Consent

Thank you for participating in this study. Before you begin, please read the following data protection information carefully and confirm your consent:

All of your data (questionnaire responses, LEXTale test results, reaction times, and accuracy) will be treated with strict confidentiality. Storage and analysis will be carried out exclusively in a pseudonymized form (e.g., under a code number such as "1001"). It will not be possible to identify you personally in any later analysis.

The data collected will be used solely for scientific purposes within the scope of this seminar project. Commercial use or disclosure to third parties is excluded.

Your participation is entirely voluntary. You have the right to withdraw from the study at any time and without providing any reason. No disadvantages will result from your withdrawal. If you choose to withdraw, all data collected up to that point will be deleted.

By selecting "yes", you attest that you have read and understand this information and that you agree to the anonymous processing of your data.

- Yes  
 No

**1 Active Filter(s)****Filter P001/F1**If any of the following options is selected: **2, -9**Then display the text **P601** and finish the interview, after the next button was clicked

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**P101**

## Participant Code (VP-Code)

Please enter the code assigned to you at the beginning of the experiment (e.g., 0001):

**P105**

## LexTALE Result

Please enter the result you achieved in the LexTALE test (e.g., 58):

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**P102**

## Age

Please enter your age (in years):

Please select your gender:

- Female
  - Male
  - Diverse
  - Prefer not to say

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## **Native Language (L1)**

P104

What is your native language?

- German
  - Mandarin Chinese
  - Other (please specify)

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## **Age of Acquisition (AoA)**

P201

How old were you when you started learning English?

(Please enter a number, e.g., 10):

years old

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## **English Proficiency – Self-Assessment**

P202

How would you rate your current English proficiency?

very poor native-like

## Speaking

○ ○ ○ ○ ○ ○ ○ ○

## Listening

○ ○ ○ ○ ○ ○ ○ ○

Reading

○ ○ ○ ○ ○ ○ ○ ○

## Writing

Do you use English regularly in your daily life?

- No, not at all
- Rarely
- Occasionally (e.g., series, music, hobbies, etc.)
- Often (e.g., acquaintances, leisure activities, etc.)
- Frequently (e.g., studies, work, etc.)
- Very frequently/daily

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## 1. Context

P204

In which context do you use English most frequently?

- University/school
- Work
- Leisure/media
- Travel
- Other:

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## Highest Educational Level Completed

P301

What is the highest level of education you have completed?

- No school degree
- Lower secondary school
- Intermediate secondary school (Mittlere Reife)
- Higher education entrance qualification (Abitur / A-level equivalent)
- Bachelor's degree
- Master's degree / Diploma
- Doctoral degree (PhD)

Which other languages have you learned, or do you speak? (Apart from your native language and English)

How would you rate your current proficiency in this/these language/s?

If you don't speak any additional languages, you may skip this question.

	very low	native-like
Language 1: <input type="text"/>		
	<input type="radio"/>	<input type="radio"/>
Language 2: <input type="text"/>		
	<input type="radio"/>	<input type="radio"/>
Language 3: <input type="text"/>		
	<input type="radio"/>	<input type="radio"/>
Language 4: <input type="text"/>		
	<input type="radio"/>	<input type="radio"/>
Language 5: <input type="text"/>		
	<input type="radio"/>	<input type="radio"/>

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## Language- and Learning-Related Factors

P501

Have you been diagnosed with a language development disorder or dyslexia?

No  
 Yes, namely:

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## 2. Neurological or Cognitive Factors

P502

Do you have any neurological conditions (e.g., ADHD, neurodiversity) or past events (e.g., severe head injuries) that could affect language or attention?

No  
 Yes, namely:

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## 3. Physiological/Sensory Factors

P503

Do you have any visual impairments that affect reading on a screen, or any motor limitations that may influence typing or affect your reaction time?

No  
 Yes, namely:

Are there any factors today that might affect your ability to concentrate (e.g., fatigue, stress, medication)?

- No
- Yes, namely:

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## Thank you for completing this questionnaire!

We would like to thank you very much for helping us.

Your answers were submitted, you may close the browser window or tab now.