

About you

1. How old are you? _____

2. Please indicate your gender. ☐ Male ☐ Female

3. What is your current level of study?

☐ Bachelors

☐ Masters

☐ Doctorate / Phd

☐ Other, please specify _____

(if you are student, please state your major as well):

4. How often do you use the following devices per day?

Phone: ☐ +6 hours ☐ 6-4 hours ☐ 4-2 hours ☐ 2-1 hours ☐ 0 hours

Smart Lamps: ☐ +6 hours ☐ 6-4 hours ☐ 4-2 hours ☐ 2-1 hours ☐ 0 hours

Tablet: ☐ +6 hours ☐ 6-4 hours ☐ 4-2 hours ☐ 2-1 hours ☐ 0 hours

Speakers: ☐ +6 hours ☐ 6-4 hours ☐ 4-2 hours ☐ 2-1 hours ☐ 0 hours

5. How often do you listen to music per day?

☐ +6 hours ☐ 6-4 hours ☐ 4-2 hours ☐ 2-1 hours ☐ 0 hours

(Please also specify the genre of the music that you like and/or listening to):
