

Evaluating the Usability of LYDO Scholarship Management System

Web and Mobile Application: LYDO Scholarship Management System

HCI Usability Testing - Moderator Form

Tasks	Observations:	
	<p>A - executed properly</p> <p>B - looks confused at first but was able to proceed</p> <p>C - assisted because the user was not able to proceed</p> <p style="text-align: center;">User Facial Expressions:</p> <p>Negative – sad, dissatisfied, disappointed</p> <p>Neutral – calm, relaxed, uninterested</p> <p>Positive – happy, satisfied, pleased</p>	
	User 1	User 2
<p><input type="checkbox"/> Open the application and tap “Apply as Scholar.”</p> <p>___ Fill in personal information (Name, DOB, Sex, Civil Status, Contact Info)</p> <p>___ Fill in educational background (School, Degree, Year Level)</p> <p>___ Upload required documents (COR, School ID, Grades, Indigency, Application Letter)</p>	<p style="text-align: center;"><input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C</p> <p>Time Started: _____</p> <p>Time Ended: _____</p> <p>Feedback</p> <p><input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Positive</p>	<p style="text-align: center;"><input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C</p> <p>Time Started: _____</p> <p>Time Ended: _____</p> <p>Feedback</p> <p><input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Positive</p>

<p>___ Submit the application</p> <p>___ If you receive an email about unclear or blurred documents, re-upload the corrected ones using the link provided.</p>		
--	--	--

<p><input type="checkbox"/> Fill up Intake Sheet (after Initial Screening approval)</p> <p>___ Check your email for the intake sheet link</p> <p>___ Open and complete all required fields</p> <p>___ Submit the intake sheet form</p>	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
	<p>Time Started:</p> <p>_____</p> <p>Time Ended:</p> <p>_____</p> <p>Feedback</p> <p><input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Positive</p>	<p>Time Started:</p> <p>_____</p> <p>Time Ended:</p> <p>_____</p> <p>Feedback</p> <p><input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Positive</p>
	<p>Time Started:</p>	
	<p>Time Ended:</p>	
<p>Total Time (minutes):</p>		
<p>Average Time (minutes):</p>		

