

User Code : 3

Observer's Script

Tasks	Did the user complete the task?	Correctly? (Y7N) (correct answer)	Max Time Observed time (mm:ss)	Number of errors?	Was lost?	Asked for help	Observed Easiness/difficulty 1 – very difficult 5 – very easy										
1	no <input type="checkbox"/> yes <input checked="" type="checkbox"/>	y	2min 1 min:		no <input checked="" type="checkbox"/> slightly <input type="checkbox"/> a lot <input type="checkbox"/>	no <input checked="" type="checkbox"/> yes <input type="checkbox"/> which?	<table><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr><tr><td></td><td></td><td></td><td>X</td><td></td></tr></table>	1	2	3	4	5				X	
1	2	3	4	5													
			X														
2	no <input type="checkbox"/> yes <input checked="" type="checkbox"/>	y	2min : 1 min		no <input checked="" type="checkbox"/> slightly <input type="checkbox"/> a lot <input type="checkbox"/>	no <input checked="" type="checkbox"/> yes <input type="checkbox"/> which?	<table><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr><tr><td></td><td></td><td></td><td>X</td><td></td></tr></table>	1	2	3	4	5				X	
1	2	3	4	5													
			X														
3	no <input type="checkbox"/> yes <input checked="" type="checkbox"/>	y	2min 20 sec:		no <input checked="" type="checkbox"/> slightly <input type="checkbox"/> a lot <input type="checkbox"/>	no <input type="checkbox"/> yes <input type="checkbox"/> which?	<table><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td></tr><tr><td></td><td></td><td></td><td></td><td>X</td></tr></table>	1	2	3	4	5					X
1	2	3	4	5													
				X													

Observations:

Task 1 : 5 task2: 5 task 3: 5