Interactive Social Reader
User Pre-Test

How old are you? 7 8 9

What is your gender? FEMALE MALE

Do you have any hearing issues? YES NO

If yes, explain what they are. ____________________________________________________________________

Do you have any vision issues? YES NO

If yes, explain what they are. ____________________________________________________________________

Do you have any mobility challenges? YES NO

If yes, explain what they are. ____________________________________________________________________

Have you ever used a computer? YES NO

If you said that you have NOT used a computer, you DON’T have to answer any more of the questions…THANK YOU!!

If you HAVE used a computer, please answer the rest of the questions below.

How many hours do you spend on a computer each day? _____

At what age did you start using computers? _____

What do you mainly use computers for? ________________________________

Have you ever read a book online? YES NO

Have you ever used a chat program to talk to your friends online? YES NO

THANK YOU!!