## **VR** Questionnaire

CS 480: Virtual Reality Applications

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Student/Team Name:	

Please fill out the following questionnaire to the best of your ability. Your responses will remain anonymous and will only be used to help improve student projects in the course. You may skip any question you do not wish to answer.

## Please rate your agreement with each statement by filling out the appropriate bubble:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
The virtual environment was responsive to actions that I initiated.	0	0	0	0	0
My interactions with the virtual environment seemed natural.	0	0	0	0	0
Moving around in the virtual environment seemed natural.	0	0	0	0	0
I was able to easily look around the virtual environment.	0	0	0	0	0
I felt that I was actually in the virtual environment.	0	0	0	0	0
I become so involved in the virtual environment that I was not aware of things happening in the real world.	0	0	0	0	0
I felt I could perfectly control my actions in the virtual environment.	0	0	0	0	0
At each step, I knew what to do next in the virtual environment.	0	0	0	0	0
I thought the interaction devices (headset and controllers) were easy to use.	0	0	0	0	0

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I thought there was too much inconsistency in the virtual environment.	0	0	0	0	0			
I enjoyed being in this virtual environment.	0	0	0	0	0			
I got tense in the virtual environment.	0	0	0	0	0			
I felt confident selecting objects in the virtual environment.	0	0	0	0	0			
I felt confident moving around in the virtual environment.	0	0	0	0	0			
I would like to experience the virtual environment again.	0	0	0	0	0			
If so, please elaborate:								
Demographic Information								
Age:								
Gender:								
Have you used a virtual reality headset before? O Yes O No  If so, which one(s)?								
Any other questions or comments?								