Usability Testing

Notetaker		
Participant #		
Tested product (e.g. website URL):		

Task(s) (Enter a brief description for each task)	Success 0 = Not completed 1 = Completed with difficulty or help 2 = Easily completed	Time to complete	# of Errors	Notes/Observations (Note why the user was successful or not successful, e.g. wrong pathways, confusing page layout, navigation issues, terminology)
#1:				
#2:				
#3:				
#4:				
#5:				

Usability Testing

System Usability Scale

Darticinant #		strongly disagree			strongly agree		
		1	2	3	4	5	
1	I think that I would like to use this system frequently.						
2	I found the system unnecessarily complex.						
3	I thought the system was easy to use.						
4	I think that I would need the support of a technical person to be able to use this system.						
5	I found the various functions in this system were well-integrated.						
6	I thought there was too much inconsistency in this system.						
7	I would imagine that most people would learn to use this system very quickly.						
8	I found the system very cumbersome to use.						
9	I felt very confident using the system.						
10	I needed to learn a lot of things before I could get going with this system.						

Source: Brooke, J. (1996). SUS-A quick and dirty usability scale. In P.W. Jordan, B. Thomas, I.L. McClelland and B. Weerdmeester (Eds.) Usability evaluation in industry, pp.189-194. London: Taylor and Francis.

Consent Form

I agree to participate in the study conducted and recorded by	•
I agree to:	
□ The session being audio/video-recorded (cross out as appropriate)	
\square The use of photographs and video recordings for the purpose of documenting the findings from	n this study
I understand that the information collected in this study is for research purposes only and that my image will not be used for any other purpose. I relinquish any rights to the recording.	y name and
I understand that participation in this usability study is voluntary, and I agree to immediately raise concerns or areas of discomfort during the session with the study administrator.	e any
I confirm that I have read and understand the information on this form and that any questions I nabout the session have been answered.	night have
Date:	
Please print your name:	
Please sign your name:	
Thank you! We appreciate your participation.	