Self-Evaluation

Once you have completed the final test, answer the questions below. If in doubt, check the box that corresponds best to your situation.

FOR ADULTS

1. Do you still look at the keyboard when you type?

Never ☐ Sometimes ☐ Often ☐ Always ☐

2. Do you arrange your workstation so that your eyes are aligned with the top of the screen?

Never ☐ Sometimes ☐ Often ☐ Always ☐

3. Do you make sure to sit in an ergonomic position when you work at the computer?

Never ☐ Sometimes ☐ Often ☐ Always ☐

4. Do you make sure that your work environment is well lit?

Never ☐ Sometimes ☐ Often ☐ Always ☐

5. Are your hands lined up with your arms, with your wrists straight?

Never ☐ Sometimes ☐ Often ☐ Always ☐

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6. Write down your speed result for the final test: _____

7. How satisfied are you with this result?

Unsatisfied ☐ Not very satisfied ☐ Satisfied ☐ Extremely satisfied ☐

8. Write down the number of errors: _____

9. How satisfied are you with this result?

Unsatisfied ☐ Not very satisfied ☐ Satisfied ☐ Extremely satisfied ☐

10. Did your fingers return to the basic position after typing each character in the test?

Never ☐ Sometimes ☐ Often ☐ Always ☐

11. During the test, did you type each character with the correct finger, as suggested by the method?

Never ☐ Sometimes ☐ Often ☐ Always ☐

NAME : _____

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