Questionnaire 2.1 (mid)

Participant Id = _____

Please fill in the following questionnaire according to how you feel.

General Discomfort

None   0   1   2   3   Severe

Fatigue

None   0   1   2   3   Severe

Headache

None   0   1   2   3   Severe

Eyestrain

None   0   1   2   3   Severe

Difficulty Focusing

None   0   1   2   3   Severe

Increased salivation

None   0   1   2   3   Severe

Sweating
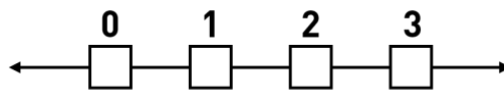
None   0   1   2   3   Severe

Nausea
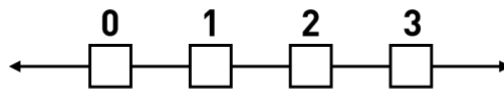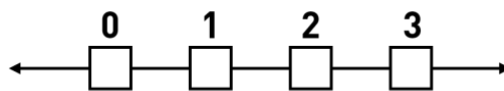
None   0   1   2   3   Severe

Difficulty concentrating

None   0   1   2   3   Severe

Fullness of head
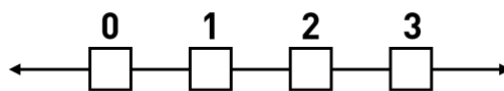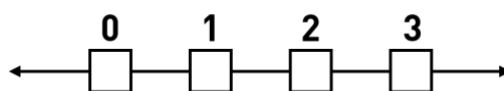
None   0   1   2   3   Severe

Blurred vision

None   0   1   2   3   Severe

Dizzy (eyes open)
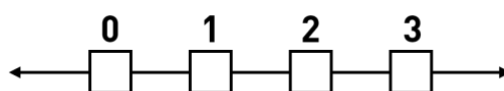
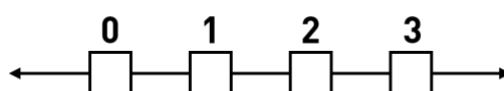None   0   1   2   3   Severe

Dizzy (eyes closed)

None   0   1   2   3   Severe
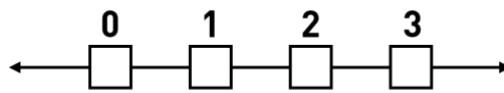
Vertigo

None   0   1   2   3   Severe

Stomach awareness
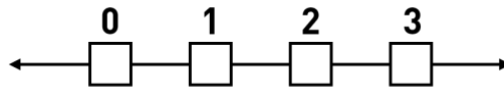
None   0   1   2   3   Severe
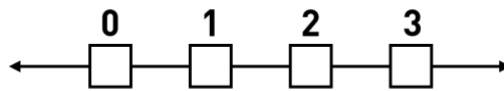
Burping

None   0   1   2   3   Severe

Questionnaire 2.2 (mid)

Please fill in the following questionnaire. For each of the statements, indicate how strongly you agree with it, from "Strongly disagree" (1) to "Strongly agree" (5). All the statements apply to **math class**.

I think that I would like to use this system frequently

Strongly
disagree

1 2 3 4 5

Strongly
agree

I found the system unnecessarily complex

Strongly
disagree

1 2 3 4 5

Strongly
agree

I found the system was easy to use

Strongly
disagree

1 2 3 4 5

Strongly
agree
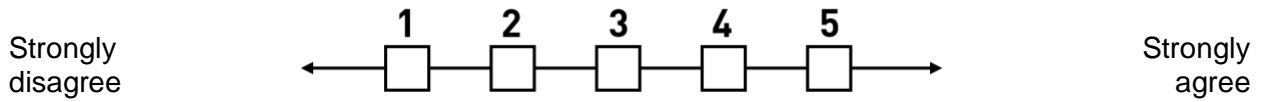
I think that I would need the support of a technical person to be able to use this system

Strongly
disagree

1 2 3 4 5

Strongly
agree

I found the various functions in this system were well integrated

Strongly
disagree

1 2 3 4 5

Strongly
agree

I thought there was too much inconsistency in this system

Strongly disagree | 1 2 3 4 5 | Strongly agree

I would imagine that most people would learn to use this system very quickly

Strongly disagree | 1 2 3 4 5 | Strongly agree
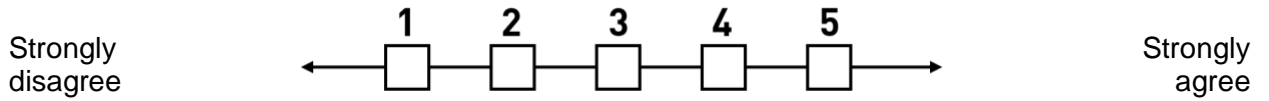
I found the system very cumbersome to use

Strongly disagree | 1 2 3 4 5 | Strongly agree
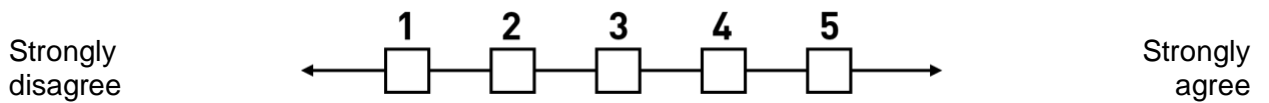
I felt very confident using the system

Strongly disagree | 1 2 3 4 5 | Strongly agree
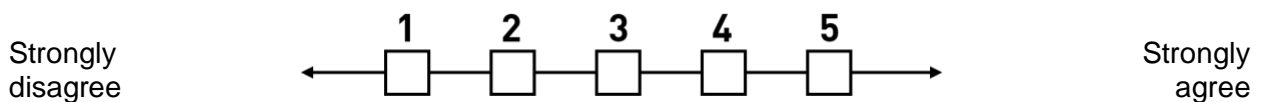
I needed to learn a lot of things before I could get going with this system

Strongly disagree | 1 2 3 4 5 | Strongly agree
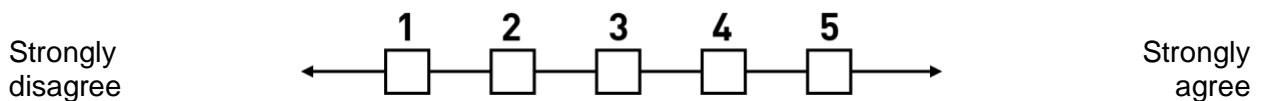
Questionnaire 2.3.1 (mid)

Please read each statement and answer on a 1 to 7 scale indicating how much each statement applied to you during the experiment. There are no right or wrong answers. Please answer spontaneously and intuitively.

I felt like the virtual hands were my virtual hands.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

I felt like the virtual fingers were my fingers.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

The virtual hands felt like human hands.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

It felt like the virtual hands belonged to me.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

The movements of the virtual hands felt like they were my movements.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

I felt like I was controlling the movements of the virtual hands.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

I felt like I was causing the movements of the virtual hands.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

The movements of the virtual hands were in sync with my own movements.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

I felt like the form or appearance of my own hands changed.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

I felt like the weight of my own hands had changed.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

I felt like the length of my own hands had changed.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

I felt like the width of my own hands had changed.

Strongly disagree   1   2   3   4   5   6   7   Strongly agree

Questionnaire 2.3.2 (mid)

Please read each statement and answer on a 1 to 7 scale indicating how much each statement applied to you during the experiment. There are no right or wrong answers. Please answer spontaneously and intuitively.

It felt like I could control the curve as if I was directly manipulating in the real world

Strongly
disagree

1   2   3   4   5   6   7
☐   ☐   ☐   ☐   ☐   ☐   ☐

Strongly
agree

The movements of the curve were caused by my movements

Strongly
disagree

1   2   3   4   5   6   7
☐   ☐   ☐   ☐   ☐   ☐   ☐

Strongly
agree

I felt as if the movements of the curve were influencing my own movements

Strongly
disagree

1   2   3   4   5   6   7
☐   ☐   ☐   ☐   ☐   ☐   ☐

Strongly
agree

I felt as if the curve was moving by itself

Strongly
disagree

1   2   3   4   5   6   7
☐   ☐   ☐   ☐   ☐   ☐   ☐

Strongly
agree

Questionnaire 2.4 (mid)

Please read each statement and answer on a 1 to 5 scale indicating how much each statement applied to you during the experiment. There are no right or wrong answers. Please answer spontaneously and intuitively.

I used the mini-display

Never   1   2   3   4   5   Very often

I used the score

Never   1   2   3   4   5   Very often

References

Kennedy, R. S., Lane, N. E., Berbaum, K. S., & Lilienthal, M. G. (1993). Simulator sickness questionnaire: An enhanced method for quantifying simulator sickness. The international journal of aviation psychology, 3(3), 203-220.

Brooke, J. (1996). Sus: a "quick and dirty'usability. Usability evaluation in industry, 189(3).

Roth, D., & Latoschik, M. E. (2019). Construction of a validated virtual embodiment questionnaire. arXiv preprint arXiv:1911.10176.

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