

Demographic Information

Subject number _____

Group

A

B

How old are you? _____

What is your birthdate? (day, month, and year) _____

What is your gender?

Male

Female

Other

What is your handedness?

Left-handed

Right-handed

Ambidextrous

(please elaborate: _____)

What is your profession? _____

Is your education/background technical?

Yes

No

What is your experience level with robots? (please mark response with an "x")

|_____|

No Experience

Expert-Level Experience

What is your experience level with Baxter? (please mark response with an "x")

|_____|

No Experience

Expert-Level Experience

What is your hometown (city, state, country)? _____