


Code Name: _____ Date: _____

Technology Survey

Circle your answer for each question:

1. I have a **computer**?  Yes No

2. I **use** the **computer** Daily Weekly Monthly Not at all

3. I have an **iPad/tablet**?  Yes No

4. I **use** the **iPad/tablet** Daily Weekly Monthly Not at all

5. I **have** a **smartphone**  Yes No

6. I **use** the **smartphone** Daily Weekly Monthly Not at all

7. I use **technology** to:   

Make phone calls	Yes	No
Email	Yes	No
Text	Yes	No (If "Yes," see question 8)
Shop	Yes	No
Look up information	Yes	No
Connect with friends	Yes	No
Tweet	Yes	No
Take photos	Yes	No
Share photos	Yes	No
Something else: _____	Yes	No

8. For **sending** texts, I use:

Speech-to-Text	Yes	No
Typing	Yes	No

For **reading** texts sent to me, I use:

Text-to-Speech	Yes	No
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Code Name: _____ Date: _____

9. I am **confident** in my ability to use my **computer**.



1	2	3	4	5	6	7	8	9	10
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Not at all

Somewhat



Very much

10. I am **confident** in my ability to use my **iPad/tablet**.



1	2	3	4	5	6	7	8	9	10
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Not at all

Somewhat



Very much

11. I am **confident** in my ability to use my **smartphone**.



1	2	3	4	5	6	7	8	9	10
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Not at all

Somewhat



Very much

12. I am **confident** in my ability to **text**.



1	2	3	4	5	6	7	8	9	10
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Not at all

Somewhat



Very much