

AGENCY DISCLOSURE NOTICE

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Voluntary Participation

Responding to this survey is voluntary, you can skip questions you prefer not to answer, and you can stop participating at any time. However, maximum participation is encouraged so the data will be complete and representative. All responses to this survey are confidential to the extent permitted by law and data will only be reported in the aggregate responses will not be linked to individuals. The only risk to you is accidental or unintentional disclosure of the data you provide; procedures are in place to ensure the survey data are safe and protected. However, if you indicate a direct threat to harm yourself or others within responses or communications about the survey, because of concern for your welfare, we may notify an office in your area for appropriate action.

Demographic Questions

1. What is your age (in years)? _____
2. What is your gender? Male Female
3. What is the highest degree or level of school you have completed? *If currently enrolled, highest degree received.*

| | |
|--|---|
| <input type="checkbox"/> No schooling completed | <input type="checkbox"/> High school graduate, diploma or GED |
| <input type="checkbox"/> Trade/technical/vocational training | <input type="checkbox"/> Associate degree |
| <input type="checkbox"/> Bachelor's degree | <input type="checkbox"/> Master's or doctorate degree |
| <input type="checkbox"/> Professional degree | |
4. Are you Hispanic or Latino? *(Check one):*

| | |
|--|---|
| <input type="checkbox"/> Yes, Hispanic or Latino | <input type="checkbox"/> No, not Hispanic or Latino |
|--|---|
5. What is your race? *(Check all that apply):*

| | |
|---|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> White | |
6. How frequently do you play video games?

| | |
|---|---|
| <input type="checkbox"/> Never | <input type="checkbox"/> A few times a week |
| <input type="checkbox"/> Up to a few times a year | <input type="checkbox"/> Once every day |
| <input type="checkbox"/> A few times a month | <input type="checkbox"/> Multiple times a day |
7. How frequently do you play first-person, action video games?

| | |
|--------------------------------|---|
| <input type="checkbox"/> Never | <input type="checkbox"/> A few times a week |
|--------------------------------|---|

ARI Game Evaluation Form

OMB CONTROL NUMBER: 0702-XXXX
OMB EXPIRATION DATE: XX/XX/XXXX

Up to a few times a year

Once every day

A few times a month

Multiple times a day

8. Do you currently hold, or have you ever held, an information technology (IT) job?

Yes, currently

Yes, not currently but in the past

No

a. If yes, what is/was the job title? _____

9. Have you ever helped someone fix a computer problem?

Yes

No

a. If yes, what assistance did you provide? _____

Evaluation Questions

Please rate the extent to which you agree with the following statements. Please use the following 1 to 5 scale to rate:

1=Strongly Disagree

2=Disagree

3=Neither Agree nor Disagree

4=Agree

5=Strongly Agree

Section 1: Evaluation Questions

1. The objective of the game was easy to understand.
2. The game was easy to use.
3. It was easy to understand what I needed to do.
4. The game was interesting.
5. I found the game interface too complex.
6. I found the overall game system very hard to use.
7. I was able to use the Mission Console to enter information.
8. I was able to use the Mission Console to answer questions.
9. The game felt too long.

Short Answer Question:

What additional comments do you have regarding the game? Please do not include personally identifiable information.

Section 2 Evaluation Questions

1. The Section 2 assessments were generally easy to use.
2. It was easy to understand what I needed to do.
3. The Section 2 assessments were interesting.
4. I found the assessment interface too complex.
5. I found the overall system very hard to use.

Short Answer Question:

What additional comments do you have regarding the Section 2 assessments? Please do not include personally identifiable information.