# Draft Demographics Questionnaire

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**Participant Number:**

**Date:**

**Time:**

**Results of Color Vision Test**

Color Vision: Passed Did not Pass

**Basic Information**

1. What is your age in years?
2. What is your gender?
   1. Male
   2. Female
   3. Other or prefer not to identify
3. Are you left or right handed?
   1. Right
   2. Left
   3. Ambidextrous
4. Is English your primary language? Circle one.
   1. Yes
   2. No
5. What is the highest level of education you have completed? Circle one.
   1. Elementary school
   2. High school or equivalent
   3. Vocational/technical school (2 year)
   4. Some college
   5. Bachelor’s degree
   6. Master’s degree
   7. Doctoral (Ph.D.) or professional (M.D., J.D., Psy.D.) degree

**Driving Experience**

1. How many years have you held a valid driver’s license?

**Technology Experience**

1. What smartphone do you own? Please list.
2. How long have you used a smartphone? Circle one.
   1. Under 2 years
   2. More than 2 years, but less than 4 years
   3. Over 4 years
3. Do you use your smartphone on a daily basis? Circle one.
   1. Yes
   2. No
4. What tasks do you typically perform on your smartphone? Check all that apply.
   * Email
   * Gaming
   * Navigation
   * Taking pictures
   * Scheduling and calendar tasks
   * Social networking
   * Text messaging
   * Web browsing
   * Other (please list):
5. Do you currently use or have you used ride sharing applications (e.g. Uber, Lyft, etc.) in the past?
6. Have you ever ridden or driven in a vehicle that would be considered autonomous or otherwise have a driverless feature?

YES NO UNSURE

If yes, which ones:

* 1. Low Speed Driverless Shuttle
  2. Other autonomous or driverless vehicle

1. Have you ever ridden or driven in a vehicle that has any of the following? If yes, which ones?

YES NO UNSURE

If yes, which ones:

* 1. Adaptive Cruise Control
  2. Lane Keeping Assist
  3. Lane Centering Assist
  4. Tesla Autopilot
  5. GM Supercruise
  6. Other (please specify)