

Personal Care Product Survey Template

All questions are optional. Follow each question's directions.

Write your answers to the open questions in the space provided.

Think about one everyday personal care product you used during the past month, such as shampoo, soap or body lotion. Answer about the same product throughout. All questions are optional. Do not include medical information or describe a health condition.

1. Which type of product are you describing?

- ☐ Shampoo or conditioner
- ☐ Soap or body wash
- ☐ Body lotion
- ☐ Deodorant
- ☐ Another everyday personal care product
- ☐ Prefer not to say

2. How often did you use that product during the past month?

- ☐ Daily or almost daily
- ☐ Several times a week
- ☐ About once a week
- ☐ Less than once a week
- ☐ Not sure

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3. Which factor most influenced your choice of that product?

- ☐ Previous experience
- ☐ Price
- ☐ Product description
- ☐ Scent or fragrance-free option
- ☐ Package design
- ☐ Recommendation
- ☐ Another factor
- ☐ I did not choose it
- ☐ Not sure

4. How easy is the package to open and close?

- ☐ Very difficult
- ☐ Somewhat difficult
- ☐ Neither difficult nor easy
- ☐ Somewhat easy
- ☐ Very easy
- ☐ Not applicable

5. How easy is it to dispense the amount you want?

- ☐ Very difficult
- ☐ Somewhat difficult
- ☐ Neither difficult nor easy
- ☐ Somewhat easy
- ☐ Very easy
- ☐ Not applicable

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6. What, if anything, makes this product inconvenient in your routine?

7. What one change would most improve your experience with it?
