

Skin Care Products 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 named cosmetic skin care product you used during the past four weeks.
Skip any item you cannot answer. Do not include a diagnosis, photograph or other personal health details.

1. How often did you use the named product during the past four weeks?

- ☐ Most days
- ☐ A few days each week
- ☐ Once or twice
- ☐ I have not used it
- ☐ Not sure

2. How did the product texture feel during normal use?

- ☐ Very comfortable
- ☐ Mostly comfortable
- ☐ Mixed
- ☐ Mostly uncomfortable
- ☐ Very uncomfortable
- ☐ Did not use it

3. How easy was the packaging to open, dispense and close?

- ☐ Very easy
- ☐ Mostly easy
- ☐ Mixed
- ☐ Mostly difficult
- ☐ Very difficult
- ☐ Did not use it

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4. How clear were the instructions for normal use?

- ☐ Very clear
- ☐ Mostly clear
- ☐ Mixed
- ☐ Mostly unclear
- ☐ Very unclear
- ☐ Did not read them

5. How closely did your experience match the product description?

- ☐ Much better than expected
- ☐ A little better
- ☐ About as expected
- ☐ A little worse
- ☐ Much worse
- ☐ I did not read the description

6. Which part should the product team improve first?

- ☐ Texture
- ☐ Scent or fragrance option
- ☐ Packaging
- ☐ Instructions
- ☐ Product description
- ☐ No change needed
- ☐ Something else

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7. What specific change would make this product easier or more pleasant to use?
