



TEMPLATE - WEBSITE USABILITY - FULFILLMENT

Location: **⚠️ Invalid Location: Cannot be blank**
Shopper: dhartsfi2 Hartsfield, Dacey [ID: 444143]
Date: Month / Day / 2020 **⚠️ Invalid Date: Cannot be blank**
Time: HH : MM **⚠️ Invalid Time: Cannot be blank**



WWW.ABOUTFACECORP.COM

888.750.8585

EVALUATOR PROFILE

1. GENDER: What is your gender? (required)

N/A Male Female

2. AGE: What is your age range? (required)

N/A 18 to 30 31 to 45 46 to 60 61+

3. STATE: In what state do you live?

N/A

4. ISP: What Internet Service Provider do you use?

N/A

5. CONNECTION: What type of Internet connection did you use to access the site? (required)

N/A Dial-Up DSL Cable Modem Other

6. ACCESS: Which of the following did you use to access the site? (required)

N/A Mac Web TV PC Other

7. COMFORT: Please choose your degree of competence and comfort using a computer: (required)

N/A High Medium Low

8. FLASH TYPE: Did you opt for software or the no-download flash? (required)

N/A Yes No


9. PAYMENT TYPE: Which method of payment did you use? (required)

N/A Visa Mastercard Discover Card AMEX Debit Card Other

10. SHOP TYPE: What type of shop were you assigned? (required)

N/A Purchase Only Purchase and Return

INITIAL OBSERVATIONS

 This section includes questions which assess your first impression of the website.

1. PURPOSE: Was the purpose of this website clear? (required)

N/A Yes No

2. TRUST: Was there anything about the site that created a feeling of trust? (required)

N/A Yes No

3. ATTENTION: What was the first thing, on this website, that caught your eye? (required)

4. STAY: What about this website encouraged you to stay? (required)

5. APPEARANCE:

A. Were the colors of the site appealing? (required)

N/A Yes No

B. Were the graphics engaging? (required)


N/A Yes No

C. Did you consider the look uncluttered? (required)

N/A Yes No

Please FULLY explain your answers to all questions in this section: (required)

REGISTRATION

 This section includes questions which assess the registration process.


1. SIMPLE: Was your registration to the site simple? (required)

N/A Yes No

2. TIMING: Were you able to complete the registration process in a reasonable amount of time? (required) N/A

- 5 minutes or less
- 6-10 minutes
- 11-15 minutes
- 16-20 minutes
- 21-25 minutes
- 26-30 minutes
- 31-40 minutes
- 41-50 minutes
- 51-60 minutes
- More than 60 minutes

Please FULLY explain your answers to all questions in this section: (required)

 EVALUATOR: Describe any experiences with the registration process you noted (both positive and negative). Please be sure to discuss in detail any negative responses to questions in this section.

PERFORMANCE & NAVIGATION

 This section includes questions which assess the speed at which the pages loaded and the ease of navigation.


1. LOAD SPEED: Please rate the quickness with which the site loaded: (required)

 10 = Extremely quick / 0 = Extremely slow


N/A 0 1 2 3 4 5 6 7 8 9 10

Exactly how long did it take?

N/A


: 

2. PAGE SPEED: Please rate your level of satisfaction with the speed of the site: (required)

 10 = Extremely satisfied / 0 = Extremely dissatisfied

N/A 0 1 2 3 4 5 6 7 8 9 10

3. NAVIGATION EASE: Please rate the ease with which you were able to navigate the site: (required)

 10 - Extremely easy / 0 = Extremely difficult

N/A 0 1 2 3 4 5 6 7 8 9 10

4. LINKS: Did all the links in the site work properly? (required)

N/A Yes No

5. PRINT: Could you print from the site successfully? (required)

N/A Yes No

6. BACK BUTTON: If you needed to hit the back button, on your browser, did this action cause functionality issues? (required)

N/A Yes No Did not use back button

7. SUPPORT: Were you confused and/or had trouble at any time? (required)

N/A Yes No

8. HELP FILES:


A. Were the Help files easy to find? (required)

N/A Yes No

B. Were the Help files easy to understand? (required)

N/A Yes No

Please FULLY explain your answers to all questions in this section: (required)

 **EVALUATOR:** Describe any experiences with the performance and navigation you noted (both positive and negative). Please be sure to discuss in detail any negative responses to questions in this section.

SUPPORT

 This section includes questions about the quality of the company's technical support.


TELEPHONE SUPPORT

Did you contact Technical Support via TELEPHONE? (required)

N/A Yes No

INTERNET/EMAIL SUPPORT

Did you contact Technical Support via INTERNET/EMAIL? (required)

 **EVALUATOR:** Before you submit your question to Technical Support, please copy and paste your message into a Word document and save it for attaching to this shop.

N/A Yes No

OFFERINGS

1. ITEMS: Were you able to find items that interested you? (required)

N/A Yes No

2. STOCK: Were all of your items in stock? (required)

N/A Yes No

3. SIZE: Did they have your size(s)? (required)

EVALUATOR: If they did not have your sizes, please explain the size(s) you needed in the comment box at the end of this section.

N/A Yes No

4. QUALITY: Did the items seem to be of good quality? (required)

N/A Yes No

Please FULLY explain your answers to all of the questions in this section: (required)

EVALUATOR: Describe any experiences with the offerings you noted (both positive and negative). Please be sure to discuss in detail any negative responses to questions in this section.

ORDER/PURCHASE

1. PAYMENT OPTIONS: Was there enough information visible on the website about the available payments options to make an informed choice? (required)

N/A Yes No

2. COMPLETE: Did you understand exactly how to complete your order? (required)

N/A Yes No

3. LOGICAL: Did you find the ordering process logical and easy? (required)

N/A Yes No

4. PAYMENT/PURCHASE LINKS: Were all payment/purchase links working properly? (required)

N/A Yes No

5. OFFER CODE: If you had an offer code (% off - discount), was it easy to use? (required)

N/A Yes No Did not have an offer code

6. OVERALL: Overall, was the ordering process smooth and hassle-free? (required)

N/A Yes No

7. PROHIBIT: During the ordering process, was there anything that prohibited you from completing your order? (required)

N/A Yes No

Please FULLY explain your answers to all questions in this section: (required)

EVALUATOR: All questions answered "No" must be fully addressed.

CORRESPONDENCE

i This section includes questions related to the correspondence you received from this company.

1. WELCOME: Did you receive a welcome email? (required)

N/A Yes No

2. AFTER ORDER: If you made a purchase, was the correspondence you received after you ordered easy to understand? (required)

N/A Yes No I did not make a purchase

3. AFTER REGISTRATION: After you registered, did you receive your first correspondence in a timely fashion? (required)

N/A Yes No

4. AMOUNT: Was the amount of correspondence you received from this site appropriate and welcomed? (required)

N/A Yes No

Please FULLY explain your answers to all questions in this section: (required)

EVALUATOR: Describe any experiences with the correspondence you noted (both positive and negative). Please be sure to discuss in detail any negative responses to questions in this section.

CUSTOMER LOYALTY/RETENTION

1. FREQUENT VISITOR: Did you know of any special frequent visitor program before you signed up? (required)

N/A Yes No

2. NEWSLETTER:

A. Could you read it? (required)

N/A Yes No

B. Did you read the newsletter you received? (required)

N/A Yes No

C. Was the newsletter personalized? (required)

N/A Yes No

3. OFFERS: Were you kept informed of offers, promotions or special competitions? (required)

N/A Yes No

Please FULLY explain your answers to all questions in this section: (required)

EVALUATOR: Describe any experiences with customer loyalty/retention you noted (both positive and negative). Please be sure to discuss in detail any negative responses to questions in this section.

BOTTOM LINE

EVALUATOR: The Bottom Line is a qualitative category which sums up the customer's experience.

EVALUATOR: Please copy all correspondence you receive into a Word document and attach it to this shop.

1. ONE WORD: Choose one word to describe your experience:

N/A

After you registered, exactly how long did you have to wait before receiving your initial correspondence?

N/A

HH : MM

CUSTOM QUESTIONS

2. CUSTOM QUESTION #1:

N/A

3. CUSTOM QUESTION #2:

N/A

4. CUSTOM QUESTION #3:

N/A

5. CUSTOM QUESTION #4:

N/A

6. CUSTOM QUESTION #5:

N/A

Additional Comments and Narrative

We have only asked specific, service-oriented questions on this shop. If you have any additional information concerning this visit, you may tell us below. It can be on anything the client/partner would want to know to assist them in maintaining the best service in the industry.

N/A

ATTACHMENTS


ATTACHMENTS: Please attach all required documents listed below by clicking the 'Upload Image Document' button at the bottom of the evaluation form. Reports submitted without ALL required documentation will be rejected and you would not be paid.

1. EMAIL CORRESPONDENCE: I have attached my proof of visit items with this report. (required)

N/A Yes No

Editor info

WOW: Choose YES if the service at this location stood out as so exemplary that someone high-up must be told about it. (required)

 In the comment box, please tell us why you thought the service stood out.

N/A

RISK: Choose YES if something so off the wall happened that someone high-up must be told about it. (required)

 In the comment box, please tell us what happened.

N/A

Was this survey edited by only a Senior Editor? If yes, please mark "YES" and add your initials to the comment box. N/A Yes

24 hour?

Yes No

48 Hour?

Yes No

Senior Only Fee 0 2.00 2.40 2.50 3.25 3.40 3.50 3.90 4.30 4.50 4.60 4.90 5.00 5.75 6.00 6.50

 DO
NOT
EDIT