

Technology acceptance survey

Every question is about the tool named below. Answer for yourself and leave your name off.

Tool or system

Date

For each statement, tick one box from 1 (strongly disagree) to 5 (strongly agree).

STATEMENT	STRONGLY DISAGREE					STRONGLY AGREE				
1 This tool helps me get my work done faster.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
2 The work I produce is better since I started using this tool.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
3 This tool saves me effort on the tasks that matter most to me.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
4 Overall, this tool is useful for the work I do.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
5 I picked up the basics of this tool quickly.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
6 I can get this tool to do what I need without workarounds.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
7 The steps in this tool make sense to me.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
8 Using this tool takes little mental effort.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
9 I like having this tool as part of my day.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
10 I will keep using this tool over the next three months.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5					
11 In a typical week, how often do you use this tool?										
☐ Not at all ☐ Once or twice ☐ A few times ☐ Daily ☐ Many times a day										

12 What would make this tool more useful or easier for you?

Optional questions (1 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

Before launch (after a demo or trial)

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
13 From what I have seen, this tool will help me do my job better.	1	2	3	4	5
14 From the demo, this tool looks easy to pick up.	1	2	3	4	5
15 I am looking forward to switching to this tool.	1	2	3	4	5
16 Once the tool is available, when do you expect to start using it?	☐ Straight away ☐ Within a month ☐ Only when required ☐ Not sure				
17 What concerns you most about moving to this tool?	 				

Support and social influence (UTAUT additions)

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
18 My manager wants our team to use this tool.	1	2	3	4	5
19 Colleagues I respect use this tool themselves.	1	2	3	4	5
20 I have the device, access and licences this tool needs.	1	2	3	4	5
21 When I get stuck, I know who can help me with this tool.	1	2	3	4	5
22 This tool works well with the other software I use.	1	2	3	4	5
23 Is using this tool your choice?	☐ Fully my choice ☐ Partly my choice ☐ Required for my role				

Training and rollout

24 How did you mainly learn to use this tool?

☐ Formal training
 ☐ A colleague
 ☐ Videos or help pages
 ☐ Trial and error

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
25 The training covered the tasks I actually do in this tool.	1	2	3	4	5

Optional questions (2 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

Training and rollout (continued)

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
26 I understand why we moved to this tool.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
27 What gets in the way of using this tool more? (tick all that apply)					
☐ No time ☐ Hard to learn ☐ Missing features ☐ Slow or unreliable ☐ Unclear benefit ☐ Nothing					
28 What extra help would be most useful now?					
☐ None ☐ A short refresher ☐ A hands-on session ☐ A go-to expert					
29 Which task do you still do outside this tool, and why?					

Extended TAM for research projects

STATEMENT	STRONGLY DISAGREE				STRONGLY AGREE
30 This tool covers the parts of my role that matter most.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
31 I trust the results this tool gives me.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
32 I could explain to a colleague what this tool has changed for me.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
33 I could finish a task in this tool with nobody around to help.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
34 I feel relaxed when I use this tool.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
35 I enjoy the time I spend in this tool.	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

About you (optional)

36 How long have you used this tool?

☐ Not yet ☐ Under a month ☐ 1 to 6 months ☐ Over 6 months

37 How old are you?

☐ Under 25 ☐ 25 to 34 ☐ 35 to 44 ☐ 45 to 54 ☐ 55 or older

Optional questions (3 of 3)

Add any of these to the core questions. Keep the numbering running on from page one.

About you (optional) (continued)

38 What is your gender?

☐ Woman ☐ Man ☐ Another identity ☐ Prefer not to say

Thank you. Your answers are anonymous.

poll-maker.com/technology-acceptance-model