

This is a post-workshop survey. We are asking you to fill out this survey after our presentation so that we can better understand if/how our presentation changed your understanding of Smart Home Security and Privacy.

What is your first name? _____

With which of the following do you most identify? Mark all that apply:

- Woman
- Man
- Non-binary person
- Other: _____

Your birth year range:

- 2005 - 1995
- 1994 - 1984
- 1983 - 1973
- 1972 - 1962
- 1961 - 1951
- 1950 - 1940
- 1939 and earlier

What racial and ethnic group do you identify with? _____

1. How would you describe a “smart home device”?

2. How many smart home devices as you described them above do you own? _____

3. What security and privacy risks could you encounter when engaging with your smart home devices?

4. Who could access your friend or family member’s smart home devices aside from them?

5. Do you know of any resources to find trusted information on smart home devices? If yes, please list them.

6. What are some steps somebody should take when giving or receiving a second hand smart home device?

7. What are some ways you can improve the security of your smart home devices?

8. How knowledgeable do you feel in being able to protect your data from unauthorized use? Mark whichever best applies.

- Not at all knowledgeable
- Somewhat knowledgeable
- Very knowledgeable

9. For the following statements, please mark whichever best applies.

	Strongly disagree	Disagree	Slightly disagree	Slightly agree	Agree	Strongly agree
The workshop topics were presented at the appropriate level of detail for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The promotional materials for this event accurately described the workshop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I learned something today that I can apply in my own home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. The best email address for the team to get in contact with you:

Why are we asking for your email address?

We will use this email to send you a virtual copy of the materials from today’s workshop. We also plan to reach out to you with another 5 minute survey in about a month, as a follow up to this workshop. Your email address will be kept confidential amongst the presenters here today and will only be used for the purpose described above. Thank you for coming!