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 SURVEY LIST



**SURVEY TITLE**

Your Handedness

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Please indicate your preferences in the use of hands in the following activity: Writing

**HINT TEXT**

(EMPTY)

**SINGLE SELECT** (PNTA ENABLED)

**OPTIONS:** ALWAYS RIGHT  
USUALLY RIGHT  
BOTH EQUALLY  
USUALLY LEFT  
ALWAYS LEFT

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Please indicate your preferences in the use of hands in the following activity: Throwing

**HINT TEXT**

(EMPTY)

**SINGLE SELECT** (PNTA ENABLED)

**OPTIONS:** ALWAYS RIGHT  
USUALLY RIGHT  
BOTH EQUALLY  
USUALLY LEFT  
ALWAYS LEFT

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Please indicate your preferences in the use of hands in the following object: Toothbrush

**HINT TEXT**

(EMPTY)

**SINGLE SELECT** (PNTA ENABLED)

- OPTIONS: ALWAYS RIGHT
  - USUALLY RIGHT
  - BOTH EQUALLY
  - USUALLY LEFT
  - ALWAYS LEFT
- 

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Please indicate your preferences in the use of hands in the following object: Spoon

HINT TEXT  
(EMPTY)

SINGLE SELECT (PNTA ENABLED)

- OPTIONS: ALWAYS RIGHT
  - USUALLY RIGHT
  - BOTH EQUALLY
  - USUALLY LEFT
  - ALWAYS LEFT
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