Mobile App Prototype Feedback Form

| Your Name | |
|-----------------------------|---|
| | |
| Your Email | |
| | |
| Device Used | |
| | |
| Overall Experience | |
| | • |
| Usability Feedback | |
| | |
| | |
| Design Feedback | |
| | |
| | |
| Features Liked | |
| | |
| | |
| Suggestions for Improvement | |
| | |
| | |