

Evaluation Sheet for Pre-Work Creams



(Name of the Pre-work cream)

Company

Department

Dear test participant

You have received the above-mentioned pre-work cream. Please apply this product during the next days before work and after every washing of the hands (e.g. after breaks). Please follow the respective application instructions. Please answer the following questions as carefully and as completely as possible.

1.) How do you rate the fluidity of the pre-work cream on the skin?

very good good moderate less good bad

2.) How do you rate the absorption of the pre-work cream by the skin?

very good good moderate less good bad

3.) How do you rate the product's scent?

very good good moderate less good bad

4.) Have you been using another pre-work cream, up to now? If so, which one?

5.) How do you rate the protective effect of test product in comparison to the product used before?

much better better equal less good worse

6.) If you had to choose between your former product and the test product, which one would you choose?

former product test product I don't care

7.) Which working substances (drilling emulsions, solvents, etc.) has your skin been confronted with during the test period?

8.) In your opinion, which changes of the test product are necessary?

9.) Personal Data:

male female age: _____

I have

no skin problem the following skin problem (e.g. allergy against...)

Finish Date of the Test Period