

Styling Cream Questionnaire
Home Use Study #24029



Name: _____

ID #:

Order #: **130** Code #: **318**

Return Date:

2/22/05 Ballot 1	3/1/05 Ballot 2
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Overall, how much did you like or dislike the STYLING CREAM you just used?

Dislike Extremely	Dislike Very Much	Dislike Moderately	Dislike Slightly	Neither Like nor Dislike	Like Slightly	Like Moderately	Like Very Much	Like Extremely
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What was it about the styling cream that you particularly **LIKED**?

What was it about the styling cream that you particularly **DID NOT LIKE**?

Overall Rating of Styling Cream					
How would you rate this styling cream overall?	Excellent	Very Good	Good	Fair	Poor
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How much did you LIKE or DISLIKE the following characteristics of the STYLING CREAM? (Select ONE response per question)

	1	2	3	4	5	6	7	8	9
<i>Liking of...</i>	Dislike Extremely	Dislike Very Much	Dislike Moderately	Dislike Slightly	Neither Like Nor Dislike	Like Slightly	Like Moderately	Like Very Much	Like Extremely
Fragrance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistency of the cream	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application/spreading through hair characteristics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feel of hair when wet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feel of hair when dry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control provided by styling cream	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frizz control provided by this cream	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining style throughout the day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>