No

Gender: Male

**Age:** 20

Do you have any neurological disturbances? Yes

Have you played this game before? Yes

Does this game remind you of any event in your memory? Yes

Please evaluate the following questions to 1-10.

| How <u>satisfied</u> are you with the game you are playing? <sup>7</sup> . |
|--|
|--|

How boring was the game you played? ....3....

How <u>horrible</u> was the game you played? .....1....

How <u>calm</u> was the game you played? ....9....

How <u>funny</u> was the game you played? 6.......

| If you have any | comment, please                         | write here | •••••                                   | •••••                                   |
|-----------------|---|------------|---|---|
| •••••           | • | •••••      | • | • |
|                 |   |            |   |   |

## **SELF-ASSESSMENT MANIKIN**

