Please circle the answers that come closest to your everyday experience. If you wear hearing aids, please answer the way you hear without them. For example, if you strongly agree with a statement, circle “A” for that item.

I can hear clearly when:

- talking to 1 other person in a quiet room. A B C D E F G N/A
- talking to 1 other person in a noisy room. A B C D E F G N/A
- talking to a small group in a quiet room. A B C D E F G N/A
- talking to a small group in a noisy room. A B C D E F G N/A
- talking to 1 other person in a car. A B C D E F G N/A
- talking on the telephone. A B C D E F G N/A
- at a meeting or in church. A B C D E F G N/A
- in a busy restaurant. A B C D E F G N/A
- watching TV. A B C D E F G N/A
- My hearing difficulty reduces my quality of life. A B C D E F G N/A

If you do have difficulty hearing, please list the 3 situations you would most like to improve. (For example, hearing the TV or hearing conversation with my husband/wife)

1.
2.
3.