

Consumer Behavior Survey

Basic Information

Name (Optional)

Age

Gender

Select 

Location

Shopping Preferences

How do you prefer to shop?

☐ Online ☐ In-store ☐ Both Equally

How often do you make purchases?

Select 

Which product categories do you shop most often?

☐ Fashion ☐ Electronics ☐ Groceries ☐ Home & Living ☐ Beauty ☐ Other

What factors influence your buying decisions? (Select all that apply)

☐ Price ☐ Brand ☐ Quality ☐ Reviews ☐ Recommendations ☐ Other

Where do you get information before making a purchase? (Select all that apply)

☐ Social Media ☐ Friends & Family ☐ Review Sites ☐ Advertising ☐ In-store ☐ Other

Feedback

What can businesses do to improve your shopping experience?

Any other comments or suggestions?

