Demo Form for Forms Class

Form Description

First Name
Please enter your preferred First Name

Last Name
Please enter your Last Name

Please compose a Haiku that reflects your joy at learning about Google Forms.

What would you rather be doing at the moment?
Select all that apply.
- Walking on a pristine, private beach beside deep blue waters.
- Napping while dreaming about walking on a pristine, private beach beside deep blue waters.
- Napping on a pristine, private beach beside deep blue waters and dreaming of taking a Google Forms Class.

Please verify the description that best describes your role at Williams

On a scale of 1 to 10, how likely are you to recommend this class to an enemy?
1 2 3 4 5 6 7 8 9 10
Very likely
Extremely likely

This is a "Grid" question. What do you think of this class?
Not as bad I imagined
Really? REALLY??!!
No comment
NIA

Please select the date you attended this class.
Month
Day
Year

Please enter a time that you would NEVER enter on a form asking for the time.
Hour
Minute
AM/PM

Confirmation Page

Your response has been recorded.

Form/File Name
(Name the form before doing anything else.)

Form Description (Optional)

Text
Short Text response

Paragraph Text
Longer text response, which can include line breaks.

Multiple Choice
Choose ONE response from a list

Checkboxes
Choose ONE or MORE response from a list

Choose From A List
Choose ONE response from a drop-down list'

Scale
Rate something from X to Y

Grid
Choose ONE response for each line in a grid

Date
Choose a date via drop-down or clicking on a calendar. This can also include a time, as an option

Time
Choose a time via a drop-down interface

Confirmation Page/Email Options