

Subject Information and Handedness Assessment Inventory

Thank you for participating our experiments!

Before the experiment, please fill out your personal information and handedness assessment inventory. If you need to type in Chinese, please use “ctrl+space” to choose the language, and then use “ctrl+shift” to choose your input method.

Please enter “space” to begin the test.

- Please type your name.
- Please type your gender: (Male/Female)
- Please type your age.
- Please type your birthplace, e.g., Taipei. If your birthplace is abroad, please type the country and the city, e.g., Los Angel, America.
- Please type your phone number.
- Please type your e-mail.
- Please type your first language, e.g., Mandarin, Taiwanese, Hakka, English, Japanese, Korean, Spanish, French, German, Filipino, Vietnamese, Malay, Hindi, Thai, others.
- Please type the language you use in your family, e.g., Mandarin, Taiwanese, Hakka, English, Japanese, Korean, Spanish, French, German, Filipino, Vietnamese, Malay, Hindi, Thai, others.
- Please type your fluent language, e.g., Mandarin, Taiwanese, Hakka, English, Japanese, Korean, Spanish, French, German, Filipino, Vietnamese, Malay, Hindi, Thai, others.
- Please type the langue your father use, e.g., Mandarin, Taiwanese, Hakka, English, Japanese, Korean, Spanish, French, German, Filipino, Vietnamese, Malay, Hindi, Thai, others.
- Please type the language your mother use, e.g., Mandarin, Taiwanese, Hakka, English, Japanese, Korean, Spanish, French, German, Filipino, Vietnamese, Malay, Hindi, Thai, others.)
- Please type the first language you use.
- Please type the degree of the fluency (fluent/ so-so/ not fluent).
- Please type the second language you use. If you don't have any, please indicate 'no'.
- Please type the degree of the fluency (fluent/ so-so/ not fluent). If you don't have any, please indicate 'no'.
- Please type the third language you use. If you don't have any, please indicate 'no'.
- Please type the degree of the fluency (fluent/ so-so/ not fluent). If you don't have

any, please indicate 'no'.

- Please type the fourth language you use. If you don't have any, please indicate 'no'.
- Please type the degree of the fluency (fluent/ so-so/ not fluent). If you don't have any, please indicate 'no'.
- Please type your degree of education (Elementary school/Junior high school/Senior high school/Bachelor/Master/PhD).
- Please indicate whether you have any language or hearing impairment (Yes/ No).
- Please indicate whether you have any physical impairment (Yes/ No).

Thank you for answering your personal information. Please answer the following questions about your handedness. Please enter "space" to start the questions.

- Please indicate your present handedness (right/ left/ both hands).
- Please indicate whether you have ever changed your handedness before (Yes/ No/ I can't remember.)
- Please indicate the reason about why you changed your handedness, e.g., parents demand, disabled or accident, unknown reason, inconvenience in living, no change, other reasons (please indicate in detail).
- Please indicate whether your family members have his or her left hand as their handedness, e.g., Father, Mother, Grandfather, Grandmother, Brother, Sister, Cousin, No.

Please choose your handedness in the following activities. (Oldfield, 1971)

Please indicate "1" if you use your right hand.

Please indicate "2" if you use your right hand definitely.

Please indicate "3" if you use your left hand.

Please indicate "4" if you use your left hand definitely.

Please indicate "5" if you use your both hands.

Please enter "space" to continue.

- Writing
- Drawing
- Throwing
- Scissors
- Toothbrush
- Knife (without fork)

- Spoon
- Broom (upper hand)
- Striking march (match)
- Opening box (lid)
- Which foot do you prefer to kick with? Right/Definitely right/Left/Definitely Left/Both foot
- Which eye do you use when using only one? Right/Definitely right/ Left/ Definitely left