Social Science Program
National Park Service
U.S. Department of the Interior

Visitor Services Project

Fort Bowie National Historic Site Visitor Study

Insert photo

OMB Approval 1024-0224
Current Expiration Date:

United States Department of the Interior

NATIONAL PARK SERVICE
Fort Bowie National Historic Site
3327 Old Fort Bowie Rd.
Bowie, AZ 85605

IN REPLY REFER TO:

March 2011

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Fort Bowie National Historic Site. This information will assist us in our efforts to better manage this park and to serve you.

This questionnaire is only being given to a select number of visitors, so your participation is very important! It should only take about 20 minutes after your visit to complete.

When your visit is over, please complete this questionnaire. Seal it with the stickers provided on the last page and drop it in any U.S. mailbox.

If you have any questions, please contact Margaret Littlejohn, NPS VSP Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

Sincerely,

(insert electronic signature)

Kym Hall
Superintendent

DIRECTIONS

At the end of your visit:

1) Please have the selected individual complete this questionnaire.
2) Answer the questions carefully since each question is different.
3) For questions that use circles (O), please mark your answer by filling in the circle with black or blue ink, or a #2 pencil.

Like this: ● Not like this: ✓ ✗ /

4) Seal it with the stickers provided.
5) Drop it in a U.S. mailbox.

Thank you!

PRIVACY ACT and PAPERWORK REDUCTION ACT statement:
16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. Your name is requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed. Thus the permanent data will be anonymous. Please do not put your name or that of any member of your personal group on the questionnaire. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Burden estimate statement: Public reporting burden for this form is estimated to average 20 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to Margaret Littlejohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.

Your Visit To Fort Bowie National Historic Site

NOTE: In this questionnaire, your **personal group** is defined as anyone that you are visiting the park with, such as spouse, family, friends, etc. This does not include the larger group that you might be traveling with, such as school, church, scouts, or tour group.

[2. TPLAN11]

1. a) Prior to your visit, how did you and your personal group obtain information about Fort Bowie National Historic Site. Please mark (●) **all** that apply in column (a).

   b) If you were to visit Fort Bowie National Historic Site in the future, how would you and your personal group prefer to obtain information about the park? Please mark (●) **all** that apply in column (b).

a) **Prior to this visit**		b) **Prior to future visits**
O	Did not obtain information prior to visit ➔ **Go to part b of this question**	
O	Chamber of Commerce/visitors' bureau/state welcome center	O
O	Friends/relatives/word of mouth	O
O	Highway signs	O
O	Inquiry to park via phone, mail, or e-mail	O
O	Fort Bowie National Historic Site website: www.nps.gov/chir	O
O	Other websites — Which one(s)? _____	O
O	Local businesses (hotels, motels, restaurants, etc.)	O
O	Maps/brochures	O
O	Newspaper/magazine articles	O
O	Previous visits	O
O	School class/program	O
O	Social media (such as Facebook, Twitter, etc.)	O
O	Travel guides/tour books (such as AAA, etc.)	O
O	Other (Please specify below)	O

This visit _____ Future visit _____

c) From the sources you used prior to this visit, did you and your personal group receive the type of information about the park that you needed? [2. TPLAN12]

O No O Yes ➔ **Go to Question 2**

d) If NO, what type of park information did you and your personal group need that was not available? Please be specific. [2. TPLAN13]

_____

[Topic area 3 – Visitor activities and use of park resources]

2. a) Would you or any member of your personal group prefer to receive information about Fort Bowie National Historic Site in languages other than English?

O Yes O No ➔ **Go to Question 3**

b) If YES, which language(s)? _____

3. On this trip, what was the **primary** reason that you and your personal group came to the Fort Bowie National Historic Site **area** (within 75 miles of the park)? Please mark (●) **only one**. [3. TRIPC1]

O Resident of the area (within 75 miles of the park) ➔ **Go to Question 4**

O Visit Fort Bowie National Historic Site

O Visit other attractions in the area

O Visit friends/relatives in the area

O Traveling through – unplanned visit

O Business

O Other (Please specify) _____

4. On this visit, how many vehicles did you and your personal group use to arrive at the park? [1. GR4]

_____ Number of vehicles

[Topic area 2 – Trip/visit characteristics]

5. a) On this visit, did you and your personal group drive a recreational vehicle to Fort Bowie National Historic Site?

O Yes O No ➔ **Go to Question 6**

b) If YES, how long was it? _____ Number of feet

c) On the visit, were you and your personal group in a vehicle or recreational vehicle pulling a trailer or another vehicle?

O Yes O No ➔ **Go to Question 6**

[Topic area 2 – Trip/visit characteristics]

d) If YES, how long was it? _____ Number of feet

6. a) On this trip, did you and your personal group stay overnight away from your **permanent residence** in the nearby area within 75 miles of Fort Bowie National Historic Site? [3. TRIPC13]

O Yes O No ➔ **Go to Question 7**

b) If YES, please list the number of nights you and your personal group stayed in the area of Fort Bowie National Historic Site. [3. TRIPC14]

_____ Number of nights in the **area** outside Fort Bowie National Historic Site

c) In which types of lodging did you and your personal group spend the night(s) in Fort Bowie National Historic Site **area** within 75 miles of the park? Please mark (●) **all** that apply. [3. TRIPC15]

O Lodge, hotel, motel, vacation rental, B&B, etc.

O RV/trailer camping

O Tent camping in developed campground

O Residence of friends or relatives

O US Forest Service/Bureau of Land Management camping

O Personal seasonal residence

O Other (Please specify) _____

7. On this visit, were the signs directing you and your personal group to and around Fort Bowie National Historic Site adequate? Please mark (●) **one** answer for each of the following. [6. EVALSERV17]

a) Interstate signs	O Yes	O No	O Did not use
b) State highway signs	O Yes	O No	O Did not use
c) Signs in local communities	O Yes	O No	O Did not use
d) Signs in the park	O Yes	O No	O Did not use

e) If you answered NO for any of the above, please explain. [6. EVALSERV18]

Interstate _____

State highway _____

In local communities _____

In park _____

[Topic area 2 – Trip/visit characteristics]

8. On this visit to Fort Bowie NHS, which park sites did you and your personal group visit? Please mark (●) **all** that apply**. Use the below map to help you locate the sites you visited.**

O Apache Springs

O Cemetery

O First Fort Bowie

O Fort Bowie Ruins Trail

O Overlook Ridge Trail

O Butterfield Overland Trail

O Accessible Entrance

O Ranger Station/Visitor center

O Other (Please specify) _____

[Place holder for updated map]

[Topic area 3 – Visitor activities and use of park resources]

9. a) On this visit to Fort Bowie NHS, did you and/ or anyone in your personal group walk the 1.5 mile trail between the parking area and the fort?

O Yes O No

[Topic area 3 – Visitor activities and use of park resources]

b) On this visit to Fort Bowie NHS, did you and/ or anyone in your personal group walk around the Fort Bowie ruins?

O Yes O No

[Topic area 5 – Visitor evaluation of park services]

c) On the trails, how would you describe the amount of information you and your personal group received?

O Not enough O About right O Too much

[Topic area 6 – Visitor perceptions of their park experience]

10. In your opinion, would a hiking/horse trail connection between Fort Bowie National Historic Site and Chiricahua National Monument be a valuable addition to your visit experience?

O Yes O No

11. a) On this visit, what activities did you and your personal group participate in within Fort Bowie National Historic Site? Please mark (●) **all** that apply in column (a). [3. ACT24]

b) If you were to visit the park in the future, in which activities would you and your personal group prefer to participate at the park? Please mark (●) **all** that apply in column (b).

a) **Activities on this visit**		b) **Activities on future visit**
O	Attending ranger-led talks/programs/hikes	O
O	Birdwatching	O
O	Creative arts (photography/drawing/painting/writing)	O
O	Enjoying solitude/quiet	O
O	General sightseeing	O
O	Horseback riding	O
O	Picnicking	O
O	Purchase books/sales items	O
O	Studying history	O
O	Visiting visitor center	O
O	Walking/day hiking	O
O	Wildlife viewing (other than birds)	O
O	Other (Please specify below)	O

This visit _____ Future visit _____

c) What are the three most important activities to you and your personal group?

First _____

Second _____

Third _____

12. a) On this visit, how many hours in **total** did you and your personal group spend visiting Fort Bowie National Historic Site? [3. TRIPC11]

_____ Total number of hours (Please list partial hours as 1/4, 1/2, or 3/4.)

b) On this visit, did you and your personal group visit Fort Bowie National Historic Site on more than one day? [3. TRIPC12]

O Yes O No

c) If YES, on how many days did you visit the park?

_____ Total number of days

d) How long did you and your personal group stay in the Fort Bowie National Historic Site **area** (within 75 miles of the park)? Please list partial hours/days as ¼, ½, ¾.[3. TRIPC11]

O Resident of the area ➔ **Go to Question 13**

_____ Number of hours **if less than 24 hours**

- OR -

_____ Number of days **if 24 hours or more**

[3. TRIPC5]

e) On this trip, how many times did you and your personal group enter the park?

_____ Number of times entered

13. a) On this visit to Fort Bowie National Historic Site, did you and your personal group attend any ranger-led programs? [3. ACT8]

O Yes O No

b) If NO, what prevented you and your personal group from participating in ranger-led talks/programs? Please mark (●) **all** that apply**.**

O Not interested. If not, why? _____

O Did not have time for this activity

O Not aware of any ranger-led talks/programs offered at park

O Not enough programs offered

O Other (Please specify) _____

c) On a future visit, would you and your personal group be interested in attending ranger-led programs in Fort Bowie National Historic Site? [3. FVIS12]

O Yes, likely O No, unlikely O Not sure

d) If YES, what length of program would you and your personal group like to attend? [3. FVIS13]

O Under 1/2 hour

O 1/2 - 1 hour

O 1 - 2 hours

O Other (Please specify below)

_____

[Topic area 3 – Visitor activities and use of park resources]

e) Which of the following programs would you and your personal group like to have available at Fort Bowie National Historic Site? These programs could be completed in one day or less. Please mark (●) **all** that apply.

O Junior Ranger program

O History/Nature camp

O Living history/costumes

O Ranger-led hike

14. One of the primary purposes of Fort Bowie National Historic Site is to present multiple viewpoints on the impacts of the Apache Wars on both the Apache and American cultures.

[3. LEARN1]

a) Please mark (●) **all** topics that you and your personal group **learned** via park films/exhibits/ranger programs during this visit Fort Bowie National Historic Site.

[Topic area 5 – Visitor evaluation of park services]

b) Next, for only those topics that you **learned**, in your opinion how important is the information in presenting different viewpoints of the Apache Wars? Please rate the importance from 1-5 in column b.

[Topic area 5 – Visitor evaluation of park services]

c) Next, for only those topics that you **learned**, how would you rate the amount of information that you received?

a) Topic	**b) 1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important**	**c) 1=Almost none 2=Some but not enough 3=About right 4=Too much**
Apache culture previous to the battle	_____	_____
Events of the Battle of Apache Pass	_____	_____
Events of the Apache Wars	_____	_____
Impact of the Apache Wars on American history	_____	_____
Impact of Apache Wars on Apache history	_____	_____
Natural setting where events occurred	_____	_____

[Topic area 5 – Visitor evaluation of park services]

d) In your opinion, which stories presented at Fort Bowie NHS need to be emphasized or strengthened?

_____

15. If you were to visit Fort Bowie National Historic Site in the future, what topics would you and your personal group like to learn about in interpretive programs? Please mark (●) **all** that apply. [3. FVIS6]

O Not interested in interpretive programs ➔ **Go to Question 16**

O Geology
O Night sky/astronomy
O Early inhabitants/prehistoric peoples
O Ranching/European
O Apache
O Buffalo soldiers/army
O Historic resources/ruins preservation
O Threatened and endangered species
O Climate change
O Wilderness
O Other (Please specify) _____

16. a) For the safety issues below, please indicate how safe you and your group felt from crime and accidents during this visit to Fort Bowie National Historic Site. Please mark (●) **one** answer for each issue. [6. EVALSERV19]

	How safe did you feel in the park?				
Safety issue	Very unsafe	Somewhat unsafe	No opinion	Somewhat safe	Very safe
Personal safety—from crime	O	O	O	O	O
Personal safety—from accidents	O	O	O	O	O
Personal property—from crime	O	O	O	O	O

b) If you marked that you felt "very unsafe" or "somewhat unsafe" for any of the above issues, please explain why. [6. EVALSERV20]

_____

_____

17. a) Does anyone in your personal group have a physical condition that made it difficult to access or participate in park activities or services? [1. GR2]

O Yes O No ➔ **Go on to Question 18**

b) If YES, what services or activities were difficult to access/participate in?

_____

[6. EVALSERV21]

18. a) Please mark (●) **all** of the information services and facilities that you or your personal group **used** at Fort Bowie National Historic Site during this visit.

b) Next, for only those services and facilities that you or your personal group **used**, please rate their importance to your visit from 1-5.

c) Finally, for only those services and facilities that you or your personal group **used**, please rate their quality from 1-5.

a) Information services/facilities used? Mark (●)	**b) If used, how important?** 1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important	**c) If used, what quality?** 1=Very poor 2=Poor 3=Average 4=Good 5=Very good
O Assistance from park staff	_____	_____
O Bookstore sales items (selection, price, services etc.)	_____	_____
O Junior Ranger program	_____	_____
O Park brochure/map	_____	_____
O Park website: www.nps.gov/fobo/ used before or during visit	_____	_____
O Ranger-led programs/tours	_____	_____
O Roadside exhibits	_____	_____
O Self-guided trail brochures	_____	_____
O Social networks (Twitter, Facebook, etc.)	_____	_____
O Technology (e-hikes, audio tours, pod/video casts, etc.)	_____	_____
O Trailside exhibits	_____	_____
O Visitor center exhibits	_____	_____

[6. EVALSERV1]

19. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to you and your personal group at Fort Bowie National Historic Site during this visit? Please mark (●) **one**.

Very poor	Poor	Average	Good	Very good
O	O	O	O	O

20. On this visit, were you and your personal group part of the following types of organized groups? [1. GR6]

a) Commercial guided tour group	O	Yes	O	No
b) School/educational group	O	Yes	O	No
c) Other (scouts, work, church)	O	Yes	O	No

d) If you were with one of these organized groups, how many people, including yourself, were in this group? [1. GR3]

_____ Number of people in organized group

21. a) On this visit, with what kind of personal group (not guided tour/school/other organized group) were you? [1. GR5]

O Alone O Friends

O Family O Family and friends

O Other (Please specify)_____

b) On this visit, how many people were in your personal group, including yourself? [1. GR3]

_____ Number of people

22. For you and your personal group on this visit, please provide the following. (If you do not know the answer, leave blank). [1. AGE3]

	a) Current age	**b) U.S. ZIP code or name of country other than U.S.**	**c & d) Number of visits to Fort Bowie National Historic Site** (including this visit) Past 5 years	Lifetime
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

23. For you and your personal group, please estimate all expenditures for the items listed below for this visit to Fort Bowie National Historic Site and the surrounding **area** (within 75 miles of the park). **Please write "0" if no money was spent in a particular category.** [3. TRIPC26]

a) Please list your group's total expenditures inside Fort Bowie National Historic Site.

b) Please list your group's total expenditures in the **surrounding area** outside the park (within 75 miles of the park).

NOTE: Surrounding area residents should only include expenditures that were **just for this trip** to Fort Bowie National Historic Site.

	EXPENDITURES	
	a) Inside park	**b) Outside park**
Lodges, hotels, motels, cabins, B&B, etc.	n/a	$_____
Camping fees and charges	n/a	$_____
Guide fees and charges	n/a	$_____
Restaurants and bars	n/a	$_____
Groceries and takeout food	n/a	$_____
Gas and oil (auto, RV, boat, etc.)	n/a	$_____
Other transportation expenses (rental cars, taxis, auto repairs, but NOT airfare)	n/a	$_____
Admission, recreation, entertainment fees	n/a	$_____
All other purchases (souvenirs, film, books, sporting goods, clothing, etc.)	$_____	$_____
Donations	$_____	$_____

c) How many people do the above expenses cover? [3. TRIPC27]

_____ Adults (18 years or over) _____ Children (under 18 years)

Please write 0 if no children were covered by the expenditures.

[Topic area 2 – Trip/visit characteristics]

d) What was the total cost of your trip to Fort Bowie National Historic Site from when you left home until you returned? $ _____

[Topic area 2 – Trip/visit characteristics]

24. a) On this trip, if you and your personal group had not chosen to visit Fort Bowie National Historic Site, what other recreation site would you have visited instead?

_____

[Topic area 2 – Trip/visit characteristics]

b) How far is this alternative site from your home? _____ miles

25. a) Which category best represents your annual **household** income? Please mark (●) **only one**. [1. INCOM1]

O Less than $24,999	O $50,000-$74,999	O $150,000-$199,999
O $25,000-$34,999	O $75,000-$99,999	O $200,000 or more
O $35,000-$49,999	O $100,000-$149,999	O Do not wish to answer

b) How many people are in your household? _____ Number of people [1. GR3]

[Topic area 1 – Visitor characteristics]

c) Did your household take any unpaid vacation or take unpaid time off of work to come on this trip?

O Yes O No ➔ **Go on to Question 26**

[Topic area 1 – Visitor characteristics]

d) How much income did your household forgo to make this trip? $ _____

26. a) What did you and your personal group like **most** about your visit to Fort Bowie National Historic Site? [6. EVALSERV25]

_____

_____

b) What did you and your personal group like **least** about your visit to Fort Bowie National Historic Site? [6. EVALSERV24]

_____

_____

27. If you were a manager planning for the future of Fort Bowie National Historic Site what would you propose? [6. OPNMGMT7]

_____

_____

_____

CORE REQUIRED

28. Is there anything else you and your personal group would like to tell us about your visit to Fort Bowie National Historic Site? [6. OPNMGMT8]

_____

_____

Thank you for your help! Please seal the questionnaire with the stickers provided and drop it in any U.S. mailbox.

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OFFICIAL BUSINESS

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