

Attachment D: POOL OF KNOWN QUESTIONS

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1. RESPONDENTS' CHARACTERISTICS AND KNOWLEDGE

AGE (AGE)

AGE1: In what year were you born? _____

AGE 2: What is your age? _____

AGE 3: For you and your personal group on this visit, please indicate (if you do not know the answer, leave blank).

	a) Current age	b) U.S. Zip Code or name of country other than U.S.	c & d) Number of visits made to [NPS site] (including this visit)	
			past 12 months	lifetime
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

EDUCATION (ED)

ED1: Please indicate the highest level of education you have completed. Please mark (●) **only one**.

- | | |
|-----------------------------------------------|-----------------------------------------|
| <input type="radio"/> Some high school | <input type="radio"/> Bachelor's Degree |
| <input type="radio"/> High School Diploma/GED | <input type="radio"/> Graduate Degree |
| <input type="radio"/> Some college | |

ED2: What is the highest level of formal education you have completed? Please mark (●) **only one**.

- | | |
|-----------------------------------------------------------|--------------------------------------------------------|
| <input type="radio"/> Less than high school | <input type="radio"/> Two-year college degree |
| <input type="radio"/> Some high school | <input type="radio"/> Four-year college degree |
| <input type="radio"/> High school graduate | <input type="radio"/> Masters Degree |
| <input type="radio"/> Vocational/trade school certificate | <input type="radio"/> Ph.D., M.D., J.D., or equivalent |
| <input type="radio"/> Some college | |

GENDER (GEND)

GEND1: Are you ...?

- Male Female

GEND2: What is your gender? Please mark (●) one.

- Male Female

GEND3: What is your sex? Please mark (●) one.

- Male Female

GROUP CHARACTERISTICS (GR)

GR1: Are you traveling with a pet today?

- No Yes (Specify pet type(s): _____)

GR2: Does anyone in your group have a physical condition that made it difficult to access or participate in park activities or services?

- Yes No

If YES, on this visit what activities or services did the person(s) have difficulty accessing or participating in? Please mark (●) **all** that apply.

- None

- [area-specific list of activities and services]

Because of the physical condition, what specific problems did the person(s) have? Please mark (●) **all** that apply.

- Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits or programs, or information desk staff even with hearing aid)
- Visual (difficulty in seeing exhibits, directional signs, visual aids that are part of programs even with prescribed glasses or due to blindness)
- Mobility (difficult in accessing facilities, services, or programs even with walking aid and/or wheelchairs)
- Other (Please describe: _____)

GR3: How many people were in your personal group, including yourself?

____ Number of people

GR4: List the number of vehicles that you and your group used to arrive at [NPS site].

_____ Number of vehicles

GR5: On this visit, what kind of personal group (not guided tour/school group) were you with? Please mark (●) **only one**.

- | | |
|-----------------------------------------------------|------------------------------------------|
| <input type="radio"/> Alone | <input type="radio"/> Family |
| <input type="radio"/> Friends | <input type="radio"/> Family and friends |
| <input type="radio"/> Other (Please specify: _____) | |

GR6: On this visit, were you and your personal group with the following type of groups?

- | | | |
|----------------------------------------------------------------------|---------------------------|--------------------------|
| Guided tour group | <input type="radio"/> Yes | <input type="radio"/> No |
| School/educational group | <input type="radio"/> Yes | <input type="radio"/> No |
| Other organized group
(such as business group, scout group, etc.) | <input type="radio"/> Yes | <input type="radio"/> No |

[INCOME \(INCOM\)](#)

INCOM1: Which category best represents your annual household income?

Please mark (●) **only one**.

- | | |
|---------------------------------------------|----------------------------------------------|
| <input type="radio"/> Less than \$24,999 | <input type="radio"/> \$75,000 to \$99,999 |
| <input type="radio"/> \$25,000 to \$34,999 | <input type="radio"/> \$100,000 to \$149,999 |
| <input type="radio"/> \$35,000 to \$49,999 | <input type="radio"/> \$150,000 to \$199,999 |
| <input type="radio"/> \$50,000 to \$74,999 | <input type="radio"/> \$200,000 or more |
| <input type="radio"/> Do not wish to answer | |

INCOME2: What was your household's total income during the past 12 months?

KNOWLEDGE (KNOW)

KNOW1: Prior to this visit, were you and your group aware of [NPS site]?

- Yes No Not sure

KNOW2: Prior to this visit, were you and your group aware that [NPS site] is managed by the National Park Service (NPS)?

- Yes No Not sure

KNOW3: Prior to this visit, were you and your group aware that you would be visiting [NPS site], an area managed by the National Park Service?

- Yes No Not sure

KNOW4: Prior to this visit, did you and your group know who [important person of NPS site] was?

- Yes No Not sure

KNOW5: Prior to this visit, were you and your group aware of [important area in NPS site]?

- Yes No Not sure

KNOW6: Prior to this visit, were you and your group aware of the following nearby National Park Service sites. Please mark (●) all sites you were aware of in **column a**.

b) If you were not previously aware of these sites, did you and your group find out about them on this visit? Please mark (●) **all** that apply in **column b**.

c) Have you and/or your group members ever visited these sites? Please mark (●) **all** that apply in **column c**.

a) Prior to visit, aware of site? b) Find out on this visit? c) Ever visited site?

[area-specific list of nearby sites]

KNOW7: Prior to this visit to [NPS site], were you and your group aware of the difference between a national park area and a national forest? Please mark (●) **only one**.

Yes No Not sure

KNOW8: Prior to this visit, were you and your group familiar with [NPS site] rules and regulations?

Yes No Not sure

KNOW9: How familiar are you with the purposes and characteristics of federally designated Wilderness areas? Please mark (●) **only one**.

Not at all familiar

Somewhat familiar

Very familiar

Extremely familiar

KNOW10: Over X% of the [NPS site] is designated wilderness area. Prior to this visit to the park, were you aware of this fact?

Yes No Not sure

KNOW11: Prior to this visit, were you aware of the following values of a wilderness area? Please mark (●) in **column b** or leave blank if you were not aware of the value.

c) Did you learn about the values of a wilderness during this visit to [NPS site]? Please mark (●) in **column c** or leave blank if you did not learn.

d) On a future visit, would you like to learn about the values of a wilderness? Please mark (●) in **column d** or leave blank if you are not interested in learning.

Values of a wilderness area	b) Aware before my visit)	c) Learned on this visit	d) Would like to learn more
[area-specific list of wilderness values (e.g. untouched/undeveloped landscape, opportunity for solitude, protection of unpolluted watershed, etc)]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other value of wilderness (Specify: _____)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

KNOW12: The National Park Service manages [NPS site]. [Other land management agency] manages land [near (e.g. east, south, etc)] of the [NPS site]. Prior to this visit, were you aware that two different organizations administer these sites? Please mark (•) only one.

- Yes, aware sites were managed by two different organizations
- No, thought both sites were managed by the National Park Service
- No, thought both sites were managed by [other management agency]
- Didn't know who managed either site

KNOW13: [NPS site] was established because of its significance to the nation. In your opinion, what is the national significance of this park?

KNOWLEDGE/Leave-No-Trace (LNT)

LNT1: Food scraps from meals/cooking should be... Please mark (●) **only one**.

- Disposed of in available trash cans
- Buried at least 6 inches below ground
- Packed out
- Placed in backcountry toilets
- Don't know

LNT2: Have you ever participated in an official low-impact practices training or workshop (e.g., Leave No Trace training)? Please mark (●) **only one**.

- Yes
- No

LNT3: How would you describe your current knowledge of low-impact practices in backcountry settings? Please mark (●) **only one**.

- Novice
- Intermediate
- Expert

LNT4: It is okay to walk off of the marked/signed trails to enjoy plants up-close, as long as you stay in places where others have already walked. Please mark (●) **only one**.

- True
- False
- Don't know

LNT5: What should you do when you see wildlife approaching your campsite? Please mark (●) **only one**.

- Put food on the ground to feed the animal
- Make noise to scare the animal away
- Be quiet and try not to startle the animal
- Quietly approach the animal to get a better view
- Don't know

LNT6: When disposing of human waste in backcountry areas where toilets are not available, it is best too... Please mark (●) **only one**.

- Leave all waste above ground
- Bury all waste
- Bury excretions, pack out toilet paper
- Pack out all human waste
- Don't know

LANGUAGE (LANG)

LANG1: What language (*if any other than English*) is frequently spoken in your home?

- English only Language (other than English): _____

LANG2: When visiting an area such as [NPS site], what **one** language do you and most members of your personal group prefer to use for the following?

Speaking: English Other (Specify)_____

Reading: English Other (Specify)_____

In your opinion, what **services** in the park need to be provided in languages other than English? Please specify or mark (●) **none**

- None Other (Specify) _____

LANG3: Which one language do you and members of your personal group primarily use to communicate with each other?

- English Other (Specify)_____

PARTNER (PART)

PART1: Are you or any members of your personal group a member of the [friends group]?

- No Yes

If NO, would you be interested in joining or supporting the [friends group]?

- No, unlikely Yes, likely

If NO, why not? _____

PART2: [Name of partner/friends group] is a friends group that supports [NPS site] through educational programs, awareness, and funding. Prior to this visit, were you and your group aware of the [friends group]?

- Yes No

PART3: Prior to your visit, had you and your personal group ever heard of the following groups? Please mark (●) **only one**.

[NPS site affiliate/partner group] Yes No

[NPS site affiliate/partner group] Yes No

RACE/ETHNICITY (RACE/ETH)

RACE/ETH 1: Are you or members of your personal group Hispanic or Latino? Please mark (●) for you and each group member.

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
Hispanic or Latino?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not Hispanic or Latino	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

RACE/ETH2: For you only, are you Hispanic or Latino?

- Yes No

RACE/ETH3: What is your race? Please mark (●) **one or more**.

- American Indian or Alaska Native Asian
- Black or African American Native Hawaiian or other Pacific Islander
- White

RACE/ETH4: What is your race? What is the race of each member of your personal group? Please mark (●) **one or more** for you and each group member.

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
American Indian or Alaska Native	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Asian	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Black or African American	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Native Hawaiian or other Pacific Islander	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
White	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

RACE/ETH5: Which of these categories best indicates your race? Answer only for yourself. Please check (●) **one or more**.

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White

RESIDENCE (RES)

RES1: Where do you live?

City _____ State _____ ZIP _____
 Country (if not US) _____

RES2: Are you a permanent resident or citizen of the U.S.?

- No — What is your country of origin?

- Yes — What is your zip code and state of residence?
 Zip Code _____
 State _____

RES3: Do you live in the United States?

- Yes (What is your Zip Code? _____)
- No (What country do you live in? _____)

RES4: How long have you lived in the community where you now live? _____
years

TRANSPORTATION (TRANS)

TRANS1: Have you ridden the park shuttle before today? Please mark (●) **only one**.

- Yes, More than once No
 Yes, Once

TRANS2: How frequently do you ride public transit for work or commuting?
Please mark (●) **only one**.

- Never Infrequently Monthly Weekly Daily

VISITATION HISTORY (VISITHIS)

VISITHIS1: Have you visited [NPS site] before today?

- Yes No

If YES, approximately how many times have you visited [during specific time period]?

Number of prior visits: _____

VISITHIS2: Have you visited [specific location within the park] before today?

- Yes No

If yes, about how many times have you visited [specific location within the park], including this visit?

_____ Number of visits **OR** Don't know/Not sure

VISITHIS3: How many times have you visited [NPS site] in the last 12 months?
_____ (Including today)

VISITHIS4: How many years have you been visiting [NPS site]?

_____ years **OR** This is my first visit

2. TRIP PLANNING (TPLAN)

TPLAN1: As you were planning your trip, what activities did you and your group expect to include on this visit? Please mark (●) **all** that apply.

[area-specific list of activities]

TPLAN2: If you and your group used the park website (www.nps.gov/[site]/) prior to or during this visit, please rate how helpful the website was in planning your visit. Please mark (●) **only one**.

Did not use website

Not at all	Somewhat	Moderately	Very	Extremely
helpful	helpful	helpful	helpful	helpful
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TPLAN3: Do you and your group have any suggestions to improve the park website? Please be specific.

TPLAN4: How did this visit to [NPS site] fit into your travel plans? Please mark (●) **only one**.

- [NPS site] was primary destination
- [NPS site] was one of several destinations
- [NPS site] was not a planned destination

TPLAN5: How much time did you and your personal group plan to spend in the park?

No planned amount of time
_____ Hours **OR** _____ Minutes

TPLAN6: In deciding to visit this national park, please indicate (on a scale of 1-5) the extent to which the following factors influenced your decision. (Circle the number of your choice.)

	Did Not Influence				Strongly Influenced
[area-specific list of factors (e.g. activity participation, historical or culture elements, to visit an NPS site, etc.)]	1	2	3	4	5

TPLAN7: From the list above, which is the most important reason for you to visit this national park? _____

TPLAN8: In preparing for this visit to [NPS site], what safety measures (such as wearing sunscreen, bringing drinking water, wearing proper footwear, etc.) did you and your personal group take? Please be specific.

None

TPLAN9: On this visit, did you and your personal group feel prepared for common safety situations (such as exposure to sun, heat, access to drinking water, flash floods, lack of proper footwear, etc.) that you encountered in the park?

Yes

No

TPLAN10: Prior to this visit, how did you and your personal group obtain information about safety measures?

Did not obtain any safety information

[area-specific list of information options]

Other (Please specify: _____)

TPLAN11: Prior to this visit, how did you and your group obtain information about [NPS site]? Please mark (●) **all** that apply in **column a**.

b) On future trips to [NPS site], what sources would you and your group prefer to use to obtain information in planning your visit? Please mark (●) **all** that apply in **column b**.

a) Prior to this visit?

b) On a future visit?

- Obtained no information prior to visit → **Go on to Part c of this Question**
- Live in local area
- [area-specific list of options (e.g. web site, friends/family, school program, television show, other NPS sites, etc)]
- Other (Please specify: _____)

TPLAN12: From the sources marked above, did you and your group receive the type of information about the park that you needed?

- No Yes Not sure

TPLAN13: If NO, what was the information you and your group needed that was not available? Please be specific.

TPLAN14: Prior to this visit, were you and your group aware of the tour reservations system at [NPS site]?

- Yes No

TPLAN15: If YES, did you and your group make tour reservations prior to your visit?

- Yes No → c) If NO, how did you and your group learn about the tours?

TPLAN16: If YES, did you get the tour reservation by calling the toll-free telephone number or by going online to the National Park Service reservation website?

- Calling phone number Online Not sure

TPLAN17: Prior to your visit, who in your group made the decision to visit [NPS site]? Please mark (●) **all** that apply.

- [list of personal group members (e.g. head of household) and other individuals (such as tour guide, etc).]

TPLAN18: What determined when you left [NPS site]? Please mark (●) **all** that apply.

- [area-specific list of factors (such as on a fixed tour schedule, bad weather conditions, lack of things to do/see, etc)]
- Other (Please specify: _____)

TPLAN19: When did you and your group make the decision to visit [NPS site]? Please mark (●) **only one**.

- On the day of the visit
- 2-7 days before the visit
- 8-30 days before the visit
- 1-6 months before the visit
- More than 6 months, but less than a year before the visit
- A year or more before the visit

TPLAN20: Where do you prefer to get your National Park trip planning information?

- [list of options (e.g. web site, friends/family, television, NPS web site, other web sites, etc)]
- Other (Please specify: _____)

TPLAN21: Which factors affected you and your group's decision to visit [NPS site] on the day that you visited? Please mark (●) **all** that apply.

- [area-specific list of factors]
- Other (Please specify) _____

TPLAN22: Why did you and your group choose to visit [NPS site] when you did?

TPLAN23: Were you and your group able to visit all of the locations in [NPS site] that you planned to?

- No
- Yes

TPLAN24: If NO, why not?

TPLAN25: From the preceding list, what locations were you and your group unable to spend enough time in?

3. TRIP BEHAVIORS

ACTIVITIES (ACT)

ACT1: How likely is it you will [area-specific activity] during this visit? **(Circle one)**

1 2 3 4 5 6 7
Very Unlikely Very Likely

ACT2: I will make an effort to [area-specific activity] during this visit. **(Circle one)**

1 2 3 4 5 6 7
I definitely will not I definitely will

ACT3: I intend to [area-specific activity] during this visit. **(Circle one)**

1 2 3 4 5 6 7
Strongly Disagree Strongly agree

ACT4: On this visit, did anyone in your personal group participate in the Junior Ranger program? Please mark (●) **only one**.

- Yes, and earned the Junior Ranger badge
- Yes, participated but did not complete
What prevented your group from earning the badge?

- No, we did not have any children in the group
- No, we had children in the group, but did not participate
Why not? _____

ACT5: If your group **did not** participate in the Junior Ranger program, please indicate the reason. Please mark (●) **all** that apply.

- Did not have any children in the group
- Did not know about the program
- Did not have enough time
- Not interested
- Other reasons (Please specify: _____)

ACT6: On this visit, did you and/or your group attend any of the informational/interpretive programs that are offered at [NPS site]?

- No
- Yes

If NO, please mark (●) **all** of the reasons that you and/or your group did not attend the interpretive programs.

- Not interested in interpretive programs
- [area-specific list of reasons (e.g. subject not interesting, etc)]
- Other (Please specify: _____)

ACT7: On this visit, did you and your personal group attend a special event (such as cultural events, music, movies, etc.)?

- Yes
- No

ACT8: On this visit, did you and your personal group attend any ranger-led activities/ programs at [NPS site]?

- No
- Yes → b) If YES, what program(s) did you and your group attend?

ACT9: If NO, why not? _____

- Not interested in activities/programs
- [area-specific list of reasons]
- Other reasons (Please specify: _____)

ACT10: On this visit, did you and your personal group take a tour with an independent guide (not a park ranger)?

Yes No

ACT11: If YES, did your guide explain the park rules and regulations to you and your group?

Yes No

ACT12: On this visit, did you and your personal group use the audio tour in [area-specific list of available languages]?

Yes No

ACT13: On this visit, did you and your personal group view the visitor center exhibits?

Yes No

ACT14: If YES, please provide one response to each of the following questions.

- a) Did you and your group find the exhibit objects interesting?
- b) Please rate the length of the exhibit text.
- c) Was the exhibit lighting adequate to see the objects on display and read the text?

Exhibit	a) Objects interesting? Circle one	b) Length of text? 1=Too short 2=About right 3=Too long	c) Exhibit lighting adequate? Circle one
[area-specific list of exhibits]	Yes No	_____	Yes No

ACT15: Did you see any aircraft during your visit in [NPS site] today?

Yes No

ACT16: Did you hear any aircraft during your visit in [NPS site] today?

Yes No

ACT17: On this visit, how did you and your group explore [NPS site]? Please mark (●) **only one**.

[list of area-specific options (such as self-guided in private vehicle, education/school tour, commercial tour, etc.)]

ACT18: On **this** visit to [NPS site], what activities did you and/or your group participate in? Please mark (•) **all** that apply in the **column a**.

b) For visits to [NPS site] during the past 12 months, please list the number of times you and/or your group participated in these activities. Mark (•) **only one** for each activity in **column b**. If you have not visited during the past 12 months, go on to question X after completing column a.

a) This visit?	Activity	b) Frequency of activities during past 12 months? Mark (•) one					
		Never	Daily	Several times a week	Several times a month	Several times a year	Only once
<input type="radio"/>	[area-specific list of activities]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	Other (Please specify: _____)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

ACT19: On this visit to [NPS site], which of the following sites did you and your group visit? Please mark (•) **all** that apply.

- [area-specific list of sites with map included]
- Other (Please specify: _____)

ACT20: On this visit to [NPS site], did you and your personal group obtain information from a [NPS site] uniformed employee (park ranger/volunteer/concession employee)?

- Yes
- No

ACT21: a) On this visit, what activities did you and your group expect to participate in? Please mark (•) **all** that apply in **column a**.

b) What activities did you actually participate in on this visit? Please mark (•) **all** that apply in **column b**.

a) Activities expected	b) Activities on this visit
<input type="radio"/> [area-specific list of activities]	<input type="radio"/>
_____ Other (Please specify below:	<input type="radio"/>
a) _____	b) _____)

ACT22: On this visit, what activities did you and/or your group participate in while at [NPS site]? Please mark (●) **all** that apply.

- [area-specific list of activities]
- Other (Please specify: _____)

ACT23: Which **ONE** activity that you or your group **participated in** was your **primary** reason for visiting [NPS site]? _____

ACT24: This question lists activities available to visitors at [NPS site].

- a) On past visits, what activities did you and your group participate in? Please mark (●) **all** that apply in **column a**. If you did not participate in an activity in the past, please leave this column blank.
- b) As you were planning your trip, what activities did you and your group expect to include on this visit? Please mark (●) **all** that apply in **column b**.
- c) On this visit, what activities did you and your group participate in? Please mark (●) **all** that apply in **column c**.

	a) Activities on past visits	b) Activities expected	c) Activities on this visit
[area-specific list of activities]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

On this visit, which one activity in column b that you and your group participated in was the **most** important to your visit to this park? Please list **only one or mark none**.

- None

ACT25: Was there anything you and your personal group expected to see or do on this visit to [NPS site] that you were not able to?

- Yes
- No

ACT26: If YES, what was it? _____

ACT27: Why weren't you able to see or do what you wanted to?

ACT28: Which of the following park programs (e.g., media exhibits, ranger programs, literature, audiovisual presentations, or informal ranger contacts) did you participate in or use on this trip? (Check all that apply.)

The [area-specific list of programs] program at the [site]

ACT29: Of the above park programs and media, which one was the most meaningful to you? _____

ACT30: Why was the park program or media you identified above most meaningful? (Explain briefly.) _____

ACT31: About how many times did you run or hike on ANY trail in a park setting in the last 12 months? Please mark (●) **only one**.

[list of time intervals] **OR** Don't know/Not sure

ACT32: Including this trip, about how many times did you hike on the [NPS trail] in the last 12 months? Please mark (●) **only one**.

[list of time intervals] **OR** Don't know/Not sure

ACT33: To the best of your recollection, in what year did you first use [NPS location (e.g. trail, campground, etc)]?

Year: _____ **OR** Don't know/Not sure

ACT34: To the best of your recollection, in what year did you start hiking or running on trails in a park setting at ANY location?

Year: _____ **OR** Don't know/Not sure

ACT35: Have you ever taken a scenic air tour over [NPS site] or any other national park? Please mark (●) **all** that apply.

Yes, I have taken a scenic air tour over [NPS site]

Yes, I have taken a scenic air tour over another national park

No, I have never taken a scenic air tour over a national park

FUTURE VISIT (FVIS)

FVIS1: Would you and your personal group visit [NPS site] again?

- Yes, likely No, unlikely Not sure

FVIS2: Why or why not? _____

FVIS3: On a future visit, how would you and your group prefer to learn about the [aspects of the park (e.g. geology, biology, and culture)] of [NPS site]? Please mark (●) **all** that apply.

- Not interested in learning about any of these topics.
- [area-specific list of learning sources, including interpretive media]
_____ Other (Please specify: _____)

FVIS4: On a future visit, how would you and your personal group prefer to learn about cultural and natural history/features of [NPS site]? Please mark (●) **all** that apply.

- Not interested in learning about features of the monument
- [list of learning methods (e.g. media services, personal services, etc)]
- Other (Please specify: _____)

FVIS5: On a future visit to [NPS site], what information on the park website ([http://www.nps.gov/\[site\]](http://www.nps.gov/[site])) would you and your group like to have available?

- Not interested in using the website
- [area-specific list of information]

FVIS6: On a future visit to [NPS site], what subjects would you and your group be most interested in learning about? Please mark (●) **all** that apply.

- Not interested in learning any of the subjects
- [area-specific list of subjects]
- Other (Please specify: _____)

FVIS7: On a future visit to [NPS site], what types of interpretive services would you and your group like to have available? Please mark (●) **all** that apply.

- Not interested in interpretive services
- [area-specific list of interpretive services]
- Other (Please specify: _____)

FVIS8: On a future visit to [NPS site], which of the following additional facilities would you like to have available? Please mark (●) **all** that apply.

- [area-specific list of additional facilities]

FVIS9: On a future visit, what would encourage you to attend a ranger-led activity/program in the future? Please mark (●) **all** that apply.

- Nothing
- Programs scheduled more often
- Greater variety of program topics
- Greater variety of types of activities
- Other reasons (Please specify: _____)

FVIS10: On a future visit, would you and your personal group be interested in attending ranger-led programs?

- Yes, likely
- No, unlikely
- Not sure

FVIS11: If YES, what length of program would you and your personal group like to attend?

- Under 1/2 hour
- Other (Please specify: _____)
- 1/2 - 1 hour
- 1 - 2 hours

FVIS12: Where [within the park] would you and your personal group like to attend a program? Or if you have no preference, please mark (●).

- Locations: _____
- Have no preference

FVIS13: On a future visit, would you and your personal group be interested in taking a guided tour or attending special lectures?

Guided tour? Yes No

FVIS14: If YES, **where** would you and your personal group like to take a guided tour? _____

FVIS15: Special lecture? Yes No

FVIS16: If YES, what subjects would you and your personal group like to learn about? _____

FVIS17: On a future visit, would you and your group be willing to ride a shuttle bus to major park viewpoints?

Yes, likely No, unlikely Not sure

FVIS18: On a future visit, if a transit (bus) service existed within [NPS site], with service to the park's major destinations, how likely would it be that you would use such a service? (*check only one*)

Very likely

Likely

Undecided

Unlikely

Very unlikely

FVIS19: If you answered "unlikely" or "very unlikely", why might you not be interested in using it?

FVIS20: On a future visit, how important would the following services on a shuttle bus be? Please circle mark (●) **one** for each characteristic.

Shuttle characteristic	Not important	Somewhat important	Moderately important	Very important	Extremely important
[area-specific list shuttle characteristics (e.g., frequency of shuttle service, on-board orientation by employee)]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

FVIS21: On a future visit, would you use [park specific] Shuttle again? Please mark (●) only one.

Definitely Yes	Probably Yes	Not Sure	Probably Not	Definitely Not	Will Not Be Back
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

FVIS22: On a future visit, would you and your group like to have the following services available in developed areas in [NPS site]?

[area-specific list of services (cell phone access internet access)] Yes No

Other (Please specify: _____)

ITINERARY (ITIN)

ITIN1: a) For this trip, please mark (●) **all** the park locations that you and your group visited in [NPS site]. Mark all that apply. Use the map on the next page to help you identify the locations you visited.

b) Next, only for the sites that you **visited**, please list the amount of time you spent at each location in hours OR days. List partial hours or days as 1/4, 1/2, 3/4.

Did not stop at any locations in the park

a) Visit park location (√)	b) Time spent	
	Hours spent— if less than 24 hours	Days spent-- if 24 hours or more
<input type="radio"/> [area-specific list of sites]	_____	_____

OR

ITIN2: For this visit, please list the **order** (#1, 2, 3, etc.) in which you and your personal group visited the following sites at [NPS site]. If you did not visit a site, please leave that line blank. Please use the map to help you locate the sites.

b) Next, compared to what you **expected**, what was the quality of the sites that you and your personal group **visited**? Please circle **one** number.

a) Order visited (1, 2, 3, etc.)	b) Meet expectations?		
	1 = Poorer than expected		
	2 = About the same		
	3 = Better than expected		
_____ [area-specific list of sites]	1	2	3
_____ Other (Please specify: _____)			

Which **one** site was the **most** important reason for your visit to [NPS site]?

ITIN3: For this visit, please mark (●) **all** the sites that you and your group visited in [NPS site]. If you did not visit a site, please leave that circle blank. Use the map below to help you locate the sites you visited.

- [area-specific list of sites with map included]
- Other (Please specify: _____)

ITIN4: What other areas of the park do you plan to visit today?

- [area-specific list of sites with map included]
- Other (Please specify: _____)

LEARNING (LEARN)

LEARN1: [NPS site] interpretive programs and exhibits discuss the following topics: [list of topics]. Please mark (●) **all** of the topics you learned about on this visit in **column a**.

Please mark (●) **in column b** how much your understanding of each topic increased during your visit.

Next, mark (●) **in column c** which topics you would be interested in learning more about on a future visit.

a) Learned on this visit?	b) Increase in understanding?				c) Interested on future visit?
	Not at all	A little	Somewhat	A lot	
<input type="radio"/> [area-specific list of topics]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

LEARN2: Please list any additional topics you and your personal group are interested in learning about [NPS site].

LEARN3: What was the most important new information that you learned about [NPS site]?

LEARN4: On this visit, did you and your group learn about [important area in NPS site]?

Yes No

LEARN5: On this visit to [NPS site], did you and your personal group learn about the following topics? Please circle **one** answer for each topic in **column a**.

Would you and your personal group be interested in learning about these topics on a future visit to [NPS site]? Please circle **one** answer for each topic in **column b**.

Topic	a) This visit?		b) Future visit?	
	Yes	No	Yes	No
[area-specific list of activities]	Yes	No	Yes	No
Other (Please specify below.)	Yes	No	Yes	No

a) _____ b) _____

LEARN6: On this visit to [NPS site], did you encounter the [important park message] with its advice and warnings?

- Yes No

LEARN7: If YES, where did you encounter it? Please mark (●) **all** that apply.

- [area-specific list of places (e.g. signs, ranger program, etc)]

[TRAILS AND BACKCOUNTRY USE \(TBACK\)](#)

TBACK1: On this visit, did you and your group go into the backcountry of [NPS site]?

- Yes No

TBACK2: Including this visit, how often have you gone into [NPS site] backcountry?

- Once 2-4 times 5 times or more

TBACK3: Approximately what time did you start and end your trip on [specific trail] today?

Approximate start time: _____AM/PM **OR** Don't know

Approximate end time: _____AM/PM **OR** Don't know

TBACK4: Approximately how far did you go (roundtrip) on the [specific] Trail today?

- [list of distances (e.g. less than one mile, one to two miles, two to five miles, more than five miles)]

TBACK5: At which of the following trailheads did you start and end this overnight backcountry trip?

Starting location (Mark one.)

Ending location (Mark one.)

- [area-specific list of starting locations]

- [area-specific list of ending locations]

TBACK6: At which trailhead did you begin your trip on the [specific trail] today?

- [area-specific list of trailheads]

TBACK7: How many nights did you spend in the backcountry of [NPS site] on this overnight backcountry trip?

Number of nights: _____ **OR** Don't know

TBACK8: On **this or past** visits, did you and your group desire to explore the backcountry of [NPS site]?

Yes No

TBACK9: If YES, were you be able to access the backcountry?

Yes No

TBACK10: If NO, what prevented you from accessing the backcountry?

TBACK11: If YES, how did you and your group access the backcountry? Please mark (●) **all** that apply.

- [list of access methods: ATV, boat, kayak, biking, hiking, etc.]
- Other (Please specify: _____)

TBACK12: On this visit to [NPS site], did you and your group [activity (e.g. walk, ride, etc.)] any park trails? [question may include a map for reference.]

Yes No

b) If YES, **on this visit** which of the following trails did you and your group [activity (e.g. walk, ride, etc.)]? If you did not visit a trail, please leave that line blank. Use the map below to help you locate the trails you used.

c) **On past visits**, which of the following trails did you and your group [activity (e.g. walk, ride, etc.)]? If you did not use a trail, please leave that line blank.

b) This visit	Trails	c) Past visits
<input type="radio"/>	[area-specific list of trails]	<input type="radio"/> No past visits
		<input type="radio"/>

TBACK13: Why did you and your group choose the trails you did?

TBACK14: Please indicate if you walked off the marked/signed trails during this overnight backcountry trip for any of the following reasons. (Please mark (●) **only one** for each item.)

[The list below is an example of items. The lists of items in individual surveys will depend on the characteristics relevant to that park's backcountry/wilderness.]

I walked off the marked/signed trails...	Yes	No	Don't Know
To move past or out of the way of others hiking on the trail	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To move out of the way of a horseback riding group	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To "go to the bathroom"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To explore an area that looked interesting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To get around a difficult part of the marked/signed trail	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To take a photograph/get a better view	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To see [area-specific attraction or feature] up-close	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To shortcut a portion of the marked/signed trail	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accidentally, because the trails were poorly marked	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
For another reason (please specify):	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

[TRANSPORTATION \(TRANS\)](#)

TRANS1: On this trip, what forms of transportation did you and your group use to arrive at [NPS site or NPS site area]? Please mark (●) **all** that apply.

- [area-specific list of transportation options (walk, private vehicle, etc.)
- Other (Please specify: _____)

TRANS2: On this visit to [NPS site], did you and your group ride the park shuttle bus?

- Yes
- No

TRANS3: If YES, please rate the usefulness of the shuttle bus service Please mark (●) **only one**.

- Not at all Useful
- Somewhat useful
- Neither useful nor not useful
- Very useful
- Extremely useful

TRANS4: How long did you have to wait to ride the park's shuttle?
 _____ (minutes)

TRANS5: How many buses departed full before you were able to board the shuttle?

[list of options (i.e. none, one, two, more than two)]

TRANS6: This question asks about your use of transportation modes inside [NPS site] and has three parts.

a) First, please identify whether or not you and your group used each of the following modes of transportation during your visit to the park. Mark (•) yes or no for each item.

b) Next, for only transportation modes that you and your group used, please use the 1-5 scale to rate *how important* it is for you to be able to use this mode inside the park.

c) Finally, for only those transportation modes that you and your group used, please use the 1-5 scale to rate your *satisfaction* with the convenience of using that mode in the park.

[area-specific list of transportation modes (e.g. personal vehicle, bicycle, shuttle)]	a) Used mode? NO YES		b) If used, how important to be able to use? 1=Not important 2=Somewhat important 3= Moderately important 4=Very important 5= Extremely important					c) If used, how satisfied with convenience? 1=Very unsatisfied 2=Unsatisfied 3= Neutral 4=Satisfied 5=Very Satisfied				
	<input type="radio"/>	<input type="radio"/>	1	2	3	4	5	1	2	3	4	5

TRANS7: What destinations will you/did you visit from [NPS site] shuttle? (Mark (●) all that apply)

[list of destinations]

TRIP CHARACTERISTICS (TRIPC)

TRIPC1: On this trip, what were the reasons that you and your group visited the area? Please mark (●) **all** that apply.

- Resident of area → **Go on to Question X**
- Visit [NPS site]
- Visit other NPS sites
- Visit other area attractions
- Visit friends/relatives in the area
- Passing through—unplanned visit
- Business
- Other (Please specify: _____)

TRIPC2: On this visit to [NPS site], which entrance did you and your group **first** use to enter the park? Please mark (●) **only one**.

[area-specific list of park entrances]

TRIPC3: On this visit, what routes did you and your group use to arrive at [NPS site]? Please mark (●) **all** that apply.

- [area-specific list of route options]
- Other (Please specify: _____)

TRIPC4: What time of day did you and your group arrive at the park visitor center on the first day of your visit? Please mark (●) **only one** response.

- | | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 8-10am | 10am-12pm | 12-2pm | 2-4pm | 4-6 pm | 6-7 pm |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

TRIPC5: On this visit to [NPS site], how many times did you and your group enter the park?

_____ Number of entries **OR** Don't know

TRIPC6: Where are you coming FROM and going TO on your visit today?

I stayed last night (slept last night) at:

[area-specific list of locations]

I entered the park today at:

[area-specific list of park entrances]

I visited, or plan to visit, the following locations today:

[area-specific list of park locations]

I will leave the park today at:

[area-specific list of park exits]

I will spend the night (tonight) at:

[area-specific area specific list of locations]

TRIPC7: On this visit, through which park entrance did you first arrive? Please mark (●) **only one**.

[area-specific list of park entrances]

TRIPC8: On this visit, through which park entrance will you leave on your final exit from the park? Please mark (●) **only one**.

[area-specific list of park exits]

TRIPC9: On this visit to [NPS site], did you and your group have any difficulties locating the site?

Yes No

TRIPC10: If YES, what was the problem?

TRIPC11: On this visit, how long did you and your group stay at [NPS site]?
Please list partial hours as 1/4, 1/2, or 3/4.

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

OR

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

TRIPC12: On this visit, did you and your personal group visit the park
on more than one day?

Yes No

If YES, how many days did you visit
[NPS site]?

If NO, how many hours did you visit
[NPS site]?

_____ Number of days

_____ Number of hours

(Please list partial days/hours as 1/4, 1/2, or 3/4.)

TRIPC13: On this trip, did you and your group stay overnight away from home in
the [NPS site] **area** (within a X-minute drive)?

Yes No

TRIPC14: If YES, please list the number of nights you and your group stayed in
the [NPS site] **area** (within a X-minute drive).

Number of nights in [NPS site] **area** _____

TRIPC15: In what type of lodging did you and your group spend the night? Please mark (●) **all** that apply.

<u>Lodging</u>	<u>[NPS site]</u>	<u>Outside park in surrounding area</u>
Lodge, motel, cabin, rented condo/home, or bed & breakfast	<input type="radio"/>	<input type="radio"/>
Tent camping in developed campground	<input type="radio"/>	<input type="radio"/>
Recreational vehicle (RV) camping in developed campground	<input type="radio"/>	<input type="radio"/>
Backcountry campsite	<input type="radio"/>	<input type="radio"/>
Personal seasonal residence	<input type="radio"/>	<input type="radio"/>
Residence of friends or relatives	<input type="radio"/>	<input type="radio"/>
Other: (Please specify: _____)	<input type="radio"/>	<input type="radio"/>

TRIPC16: In what town/city did you and your group stay on the **night before your arrival** at [NPS site]?

Nearest town/city _____ State _____

TRIPC17: In what town/city did you and your group stay on the **night after your departure** from [NPS site]?

Nearest town/city _____ State _____

TRIPC18: In which community(ies) did you obtain support services (e.g. information, gas, food, or lodging) for this visit to [NPS site]? Please mark (●) **all** that apply.

[area-specific list of communities]

TRIPC19: Were you and your group able to obtain all of the services that you needed in these communities?

No Yes

TRIPC20: If NO, what needed services were not available?

Service (list) _____ Comments (Please be specific.) _____

TRIPC21: In **column a**, please mark (●) **all** the services that you and your group use in the nearby communities of [area-specific list of nearby communities] that were specifically related to this park visit.

In **column b**, please mark (●) **all** the services you would have used if they had been available.

Did not use any services on this visit.

a) Used on this visit _____ b) Would have used if available _____

[area-specific list of services (e.g. buy gasoline, eat a meal, etc)]

Other (Please specify: _____)

TRIPC22: Do you have any comments about these services?

Service (list) _____ Comment—please be specific _____

TRIPC23: In the park, did you and your group have any difficulty finding the commercial services (such as lodging, food, gas, gift shops, etc.)?

Yes No

TRIPC24: If YES, which of the following reasons contributed to the problem? Please mark (●) **all** that apply.

[area-specific list of reasons (such as signs, traffic, service was closed, etc)]

TRIPC25: On this visit, did you and your personal group eat in the [NPS site] restaurant/snack shop or shop in the gift shop?

Yes No

TRIPC26: For you and your group, please report all expenditures for the items listed below for this visit to the [NPS site] and the surrounding area (within a X-minute drive). Please write "0" if no money was spent in a particular category.

- a) Please list your group's total expenditures inside [NPS site].
- b) Please list your group's total expenditures in the surrounding area (within a X-minute drive of park).

NOTE: Surrounding area residents should only include expenditures that were **directly related** to this visit to [NPS site].

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

TRIPC27: How many people do the above expenses cover?

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

TRIPC28: On this visit to [NPS site], what other places did you and your group visit in the area (within a X-minute drive)? Please mark (●) **all** that apply.

- [area-specific list of nearby attractions/places]
- Other (Please specify: _____)

TRIPC29: What other local and regional attractions did you (or do you plan to) visit on this trip?

[area specific list of attractions]

TRIPC30: Was your trip to [NPS site] part of a packaged tour (package tours commonly include transportation, meals, lodging, and activities sold as a pre-set itinerary from a single company)? You may have purchased a package tour directly from the company providing the service, or you may have worked with a travel agent who booked you on a package tour.

Yes No

TRIPC31: If YES, what was the name of the company (not travel agency) that provided the package tour? _____

TRIPC32: When visiting [NPS site], were you and your group on a fixed schedule, such as schedules set up by cruise ship tours or other tours, business meeting, etc.)?

No Yes

TRIPC33: Compared with what you had planned, how much time did you and your group spend visiting [NPS site]? Please mark (●) **only one**.

- Didn't have a planned amount of time
- Spent longer time than planned
- Spent about the time planned
- Spent less time than planned

TRIPC34: If you and your group stayed for a shorter or longer time than planned, what were your reasons for changing your plans? Please mark (●) **all** that apply.

- Fewer things to do/see than expected
- More things to do/see than expected
- Longer wait at [important area/site] than expected
- Shorter wait at [important area/site] than expected
- Unable to obtain a ticket for [important area/site]
- Other (Please specify: _____)

TRIPC35: What would make you and your group stay longer than you did in the [NPS site] **area** (within an X-minute drive)?

OR Would not stay longer

4. PREFERENCES/MOTIVES/ATTITUDES

PLACE ATTACHMENT (PA)

[The following questions measure different dimensions of attachment to place.]

PA1: Please indicate your level of agreement or disagreement with each of the statements. Please mark (●) **only one** response for each item.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
[NPS site] means a lot to me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy [activity] in [NPS site] more than in any other park.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am very attached to [NPS site].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I wouldn't substitute any other [similar place] for the [activity] I do in [NPS site].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I identify strongly with [NPS site].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I get more satisfaction out of visiting [NPS site] than from visiting any other [similar] area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[Activity] in [NPS site] is more important than [activity] in any other place.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel no commitment to [NPS site].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No other place can compare to [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel that I can really be myself at [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel [NPS site] is part of me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Few people know [NPS site] like I do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Visiting [NPS site] says a lot about who I am.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel a sense of pride in my heritage when I am at [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[NPS site] is a special place for my family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Many important family memories are tied to [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[NPS site] contributes to the character of my community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My community's history is strongly tied to [NPS site].	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[NPS site] has helped put my community on the map.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My community's economy depends on [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

My family's income or livelihood depends on [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Local economies depend on [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[NPS site] is important to protecting the landscape from development.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[NPS site] is important in providing habitat for wildlife.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[NPS site] is important in protecting water quality.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[NPS site] is best for what I like to do.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The things I do at [NPS site] I would enjoy doing just as much at a similar site.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Doing what I do at [NPS site] is more important to me than doing it in any other place.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I am at [NPS site] others see me the way I want them to see me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

PA2: What is your favorite place at [NPS site]? Please name it, describe its location, or mark (●) "none."

_____ is my favorite place (name or description)

None

PA3: How important is [NPS site] to you? Please mark (●) **only one** response.

Not important	Somewhat important	Moderately important	Very important	Extremely Important
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

RECREATION PREFERENCES (PREF)

PREF1 : Below is a list of possible experiences you may want (prefer) to have while visiting [NPS site]. For each item please **indicate how important the experience is** to you on your visit to the park.

[This is a representative list of commonly used Recreation Experience Preference scale items. For the full list consult Attachment E].

Experience:	Importance				
	Not Important	Somewhat Important	Moderately Important	Very Important	Extremely Important
To be in control of things that happen	1	2	3	4	5
To be with respectful people	1	2	3	4	5
To experience solitude	1	2	3	4	5
To be close to nature	1	2	3	4	5
To be alone	1	2	3	4	5
To be my own boss	1	2	3	4	5
To be where things are fairly safe	1	2	3	4	5
To be near considerate people	1	2	3	4	5
To avoid the unexpected	1	2	3	4	5
To see wildlife	1	2	3	4	5
To get away from noise	1	2	3	4	5
To be away from crowds of people	1	2	3	4	5
To get away from the clatter and racket of home	1	2	3	4	5
To know others are nearby	1	2	3	4	5
To view scenic beauty	1	2	3	4	5
To be near others who could help if you needed them	1	2	3	4	5
To feel my independence	1	2	3	4	5
To learn about things at [NPS site]	1	2	3	4	5
To view scenery	1	2	3	4	5
To see a specific species of wildlife	1	2	3	4	5
To photograph wildlife	1	2	3	4	5
To think about your personal values	1	2	3	4	5
To think about who you are	1	2	3	4	5
To be in a place that is quiet	1	2	3	4	5
To learn more about nature	1	2	3	4	5
To develop personal, spiritual values	1	2	3	4	5

PREF2: The following is a list of characteristics commonly associated with backcountry and wilderness areas. Please indicate how important each of the items listed below was to you as a reason to use the trails in the park today. (Circle one number for each item.)

[The list below is an example of items. The lists of items in individual surveys will depend on the characteristics relevant to that park's backcountry/wilderness.]

	Not at all important	1	2	3	4	5	Extremely Important	Don't Know/ Not Sure
Remoteness	1	2	3	4	5			DK/NS
Solitude	1	2	3	4	5			DK/NS
Primitive recreation/few facilities	1	2	3	4	5			DK/NS
Pristine natural environment	1	2	3	4	5			DK/NS
Physically challenging/demanding	1	2	3	4	5			DK/NS
Unconfined recreation/free from rules and regulations	1	2	3	4	5			DK/NS
Requiring self-reliance	1	2	3	4	5			DK/NS
Fostering a sense of humility toward nature	1	2	3	4	5			DK/NS
Fostering intimacy/connection with others in your group	1	2	3	4	5			DK/NS
Fostering spiritual connection	1	2	3	4	5			DK/NS
Fostering immersion in nature	1	2	3	4	5			DK/NS

SOUNDSCAPE PERCEPTIONS (SOUND)

SOUND1: Many national historical parks such as [NPS site] commemorate historic events that include recreating cultural and historic sounds such as muskets, farm animals, fifes and drums, etc. How important are the cultural and historic sounds to the enjoyment of your park experience? Please mark (●) **only one**.

Not important Somewhat important Moderately important Very important Extremely important

SOUND2: While visiting an area such as [NPS site], how important are natural sounds (sounds of birds, wildlife, water, etc.) to the enjoyment of your park experience? Please mark (●) **only one**.

Not important Somewhat important Moderately important Very important Extremely important

SOUND3: On this visit to [NPS site], how did modern sounds (traffic noise, mowing machine, airplanes, construction, etc.) affect your ability to hear and enjoy the following sounds? Please mark (●) **only one** response for each item.

Ability to hear/enjoy	Did not experience	Detracted from	No effect	Added to
[area-specific list of natural sounds]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[area-specific list of cultural/historical sounds]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

SOUND4: Please explain any "detracted from" responses to this question.

SOUND5: We would like to know about the [sounds (such as natural sounds, mechanical sounds, sounds of other visitors, etc)] you heard in [NPS site] today.

Did you notice any natural sounds in [NPS site] today?

- Yes
- NO

SOUND6: If YES, did you find any of these natural sounds pleasing?

- Yes
- No

SOUND7: If YES, did you find any of these natural sounds annoying?

- Yes
- No

SOUND8: Please describe the natural sounds that you found to be pleasing or annoying.

Pleasing: _____

Annoying: _____

SOUND9: Step 1: The listening portion of this survey will be lead by an NPS volunteer. Remember that all sounds are included, both human and natural.

Step 2: Close your eyes and relax, and keep track of each individual sound that you heard.

Step 3: While holding your concentration, focus on the sounds you have heard. Now, please take a moment to fill out the attached sheet before speaking with other participants about what you have heard. This exercise begins on the next page.

Step 4: Please put a \checkmark check mark next to each sound that you heard during the exercise. If the sound is not listed, please write the sound(s) in the blank spaces provided at the bottom of the SOUNDS column on page 4. Again, only put a \checkmark check mark next to each sound that you actually heard during the exercise.

Step 5: Under the FEELINGS OR EMOTIONS ASSOCIATED WITH SOUNDS column, please list any feelings or emotions that you associated with each of the sounds you checked \checkmark . Please only respond questions corresponding to sounds you actually heard.

Examples: I felt *relaxed* because the stream was soothing to me.
I felt *annoyed* because the bird was beeping like an alarm clock.
I felt *frustrated* because the dog was barking when I wanted peace and quiet.

Step 6: Under the ACCEPTABILITY OF SOUNDS AT THIS LOCATION column, please circle one number which best describes how unacceptable or acceptable the sound was for this location in the park: The scale is on a continuum from: - 4 as very unacceptable, - 2 as slightly unacceptable, 0 as neutral, +2 as slightly acceptable, and + 4 as very acceptable.

Step 7: Under the PERSONAL INTERPRETATION column, please circle one number which best describes how pleasing or annoying the sound was to you: The scale is on a continuum from: -4 as very annoying, - 2 as slightly annoying, 0 as neutral, +2 as slightly pleasing, and + 4 as very pleasing.

Sounds		ACCEPTABILITY OF SOUND AT THIS LOCATION										PERSONAL INTERPRETATION OF THIS SOUND										Feelings or emotions associated with that sound							
	Did you hear this sound?	Very unacceptable	-3	Slightly unacceptable	-2	-1	Neutral	0	+1	Slightly acceptable	+2	+3	+4	Very acceptable	Very annoying	-4	-3	Slightly annoying	-2	-1	Neutral	0	+1	Slightly pleasing	+2	+3	+4	Very pleasing	
[list of sounds]	<input type="checkbox"/> Yes	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4										

THEORY OF PLANNED BEHAVIOR QUESTIONS (TpB)

[These questions illustrate the Theory of Planned Behavior framework as it is applied to an NPS situation. Items will differ, depending on the nature of the study.]

TpB1: Please answer the following questions regarding your [activity at NPS site].

Doing specific activity (e.g., taking shuttle) will:	Very Unlikely	Moderately Unlikely	Slightly Unlikely	Neither Likely nor Unlikely	Slightly Likely	Moderately Likely	Very Likely
Cause me to be with new and different people	1	2	3	4	5	6	7
Allow me to have the type of experience I desire at the park	1	2	3	4	5	6	7
Allow me to engage in my chosen activities while at GNP	1	2	3	4	5	6	7
Allow me to go to the areas I want within the park	1	2	3	4	5	6	7
Shorten traffic delays in the park due to construction	1	2	3	4	5	6	7
Prevent me from having to deal with undesirable traffic conditions at the park	1	2	3	4	5	6	7
Allow me to see the sights at the park	1	2	3	4	5	6	7
Reduce my freedom to do the things I want to do at the park	1	2	3	4	5	6	7
Allow me more time to interact with my family	1	2	3	4	5	6	7
Require me to plan my day	1	2	3	4	5	6	7
Alleviate parking issues within the park	1	2	3	4	5	6	7
Be a safe way to travel the through the park	1	2	3	4	5	6	7
Reduce my stress while visiting the park	1	2	3	4	5	6	7
Help me decide where to stop along my route	1	2	3	4	5	6	7
Allow me to see more of the park	1	2	3	4	5	6	7
Benefit the environment the park	1	2	3	4	5	6	7
Make me more aware of time while visiting the park	1	2	3	4	5	6	7
Be a comfortable way to travel through the park	1	2	3	4	5	6	7
Relieve me of the responsibility of driving while in the park	1	2	3	4	5	6	7
Limit the number of things I can do while in the park	1	2	3	4	5	6	7
Benefit the environment in general	1	2	3	4	5	6	7

TpB2: Please evaluate the following possible outcomes of riding the shuttle at [NPS site].

	Very Bad	Moderately Bad	Slightly Bad	Neither Bad nor Good	Slightly Good	Moderately Good	Very Good
Being with new and different people is	1	2	3	4	5	6	7
Having the type of experience I desire in the park is	1	2	3	4	5	6	7
Engaging in my chosen activities while in the park is	1	2	3	4	5	6	7
Going to the areas I want within the park is	1	2	3	4	5	6	7
Not having to deal with undesirable traffic conditions in the park is	1	2	3	4	5	6	7
Shortened traffic delays due to construction are	1	2	3	4	5	6	7
Seeing the sights in the park is	1	2	3	4	5	6	7
Reduced freedom to do the things I want to do in the park is	1	2	3	4	5	6	7
Allowing me more time to interact with my family is	1	2	3	4	5	6	7
Requiring me to plan my day is	1	2	3	4	5	6	7
Alleviating parking issues within the park is	1	2	3	4	5	6	7
Safely traveling in the park is	1	2	3	4	5	6	7
Reducing my stress while visiting the park is	1	2	3	4	5	6	7
Helping me decide where to stop along my route is	1	2	3	4	5	6	7
Allowing me to see more of the park is	1	2	3	4	5	6	7
Benefiting the environment in the park is	1	2	3	4	5	6	7
Making me more aware of time while visiting the park is	1	2	3	4	5	6	7
Comfortably traveling through the park is	1	2	3	4	5	6	7
Relieving me of the responsibility of driving while in the park is	1	2	3	4	5	6	7
Limiting the number of things I can do while in the park is	1	2	3	4	5	6	7
Benefiting the environment in general is	1	2	3	4	5	6	7

[The following questions measure the “subjective norm” component of the Theory of Planned Behavior and the “motivation to comply” component.]

TpB3: Generally speaking, how much do you think each of the following people would think that you should ride the shuttle in the park? Please circle **only one** response for each item.

	Not at All	Slightly	Somewhat	Moderately	Very much		
The group you are traveling with	1	2	3	4	5	6	7
Your family	1	2	3	4	5	6	7
Your friends	1	2	3	4	5	6	7
Park managers	1	2	3	4	5	6	7

TpB4: Generally speaking, how much do you care what the following people think you should do while visiting GNP? Please circle **only one** response for each item.

	Not at All	Slightly	Somewhat	Moderately	Very much		
The group you are traveling with	1	2	3	4	5	6	7
Your family	1	2	3	4	5	6	7
Your friends	1	2	3	4	5	6	7
Park managers	1	2	3	4	5	6	7

5. CROWDING AND VISITOR EXPERIENCES

CROWDING PERCEPTIONS (CROWD)

CROWD1: Please indicate how crowded you felt in the following locations today.
(Circle **one** number for each location you visited.)

	Not at all Crowded		Slightly Crowded		Moderately Crowded		Extremely Crowded		
[area-specific list of areas]	1	2	3	4	5	6	7	8	9

CROWD2: For the places you visited, please rate how crowded you and your group felt by the number of people present at the following locations. Please mark (●) **only one** answer for each place.

Visit on this trip? (●)	Not at all crowded	A little crowded	Moderately crowded	Very crowded	Extremely crowded
<input type="radio"/> [area-specific list of places]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Other (Specify: _____)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CROWD3: On this visit to [NPS site], compared to what you expected, how crowded did you and your group feel? Please mark (●) **only one**.

- I didn't know what to expect
- Less crowded than expected
- About the same as expected
- More crowded than expected

CROWD4: Overall, compared to what you expected, how much traffic congestion did you experience during your visit to [NPS site] Please mark (●) **only one**.

- I didn't know what to expect
- Less traffic congestion than I expected
- About the same as I expected
- More traffic congestion than I expected

CROWD5: While inside the park, were you able to find parking at all the areas you wanted to visit?

- Yes No

CROWD6: If NO, at which area(s) were you unable to find parking?

CROWD7: On this visit to [NPS site], did you and your group experience any parking problems?

- Yes No

CROWD8: If YES, what parking problems did you experience?

CROWD9: On this visit to [NPS site], did you and your group experience traffic congestion or parking difficulties at any of the following places? Please mark (●) **all** that apply.

- Did not experience traffic congestion or parking difficulties, **OR**
 [area-specific list of locations]

[Question may include a park map for reference.]

CROWD10: Approximately how much time did you wait in traffic congestion to enter [NPS site] on this trip? (Enter 0 if you did not experience any congestion.)

_____ Time in minutes

CROWD11: How acceptable was it to wait this amount of time to enter [NPS site]?

Very Acceptable	Acceptable	Neither Acceptable nor Unacceptable	Unacceptable	Very Unacceptable
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CROWD12: Overall, approximately how much time did you spend in traffic congestion looking for parking at [NPS site] on this trip? (Enter 0 if you did not experience any congestion.)

_____ Time in minutes

CROWD13: How acceptable was it to spend this amount of time looking for parking in [NPS site]?

Very Acceptable	Acceptable	Neither Acceptable nor Unacceptable	Unacceptable	Very Unacceptable
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CROWD14: Please indicate the degree to which you experienced solitude while [specific activity at NPS site] today? Please circle **only one** answer.

1	2	3	4	5	6	7	8	9
Not at all		Somewhat			Moderately		Extremely	

CROWD15: About how many other hiking groups did you see per day while you were hiking on the trails during your backcountry trip? (Enter a question mark “?” if you don’t remember)

of hiking groups per day: _____ **OR** Did not see any hiking groups

CROWD16: How many nights were you able to see or hear other visitor groups staying overnight near your campsite/cabin during this overnight backcountry trip? (Enter a question mark “?” if you don’t remember)

Number of nights: _____ **OR** Did not occur on any night

CROWD17: Please estimate the number of other visitors you saw at each of the following locations.

Location	Number of other visitors	I can't remember	Does not apply
[area-specific list of locations]	_____	<input type="radio"/>	<input type="radio"/>

CROWD18: Please indicate whether (and if so, how often) you have ever done each of the following in any [NPS site, including wilderness or backcountry recreation area].

	Ever Done?		If so, how often?				
	No	Yes →	Rarely	Occasionally	Often	Usually	Always
Visit earlier or later in the season to avoid seeing other people	No	Yes →	1	2	3	4	5
Visit on weekdays to avoid weekend crowds	No	Yes →	1	2	3	4	5
Go to trails that are less crowded	No	Yes →	1	2	3	4	5
Avoid places that have limits on the amount of use	No	Yes →	1	2	3	4	5
Go to other areas where you are less likely to see other people	No	Yes →	1	2	3	4	5
Avoid places that regulate the use of horseback riders	No	Yes →	1	2	3	4	5
Avoid attractions that are crowded	No	Yes →	1	2	3	4	5

CROWDING ATTITUDES (CRWDATT)

CRWDATT1: Please indicate the extent to which you agree or disagree with each of the following statements concerning management of [area-specific activity] in [NPS site]. (Circle **one** number for each item.)

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know / Not Sure
If people feel crowded, use limits should be imposed	1	2	3	4	5	DK/NS
If visitor-caused resource impacts are high, use limits should be imposed	1	2	3	4	5	DK/NS
Use limits should never be imposed, even if use is high	1	2	3	4	5	DK/NS
If solitude is lost, use limits should be imposed	1	2	3	4	5	DK/NS
More trails should be added to reduce the number of people seen	1	2	3	4	5	DK/NS
The number of trails that allow horseback riding should be reduced	1	2	3	4	5	DK/NS
The number of trails that allow horseback riding should be increased	1	2	3	4	5	DK/NS
More trailheads should be added to disperse use away from busy areas	1	2	3	4	5	DK/NS

CRWDATT2: The number of other people I see while [participating in area-specific activity] in places like [NPS site] affects my ability to experience solitude. (Circle **one** number.)

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

CRWDATT3: Please indicate for each of the following numbers of people seen per hour while [participating in area-specific activity] in [NPS site] how likely you would be to experience solitude during such a trip. A rating of “-4” means you would be very unlikely to experience solitude, and a rating of “+4” means you would be very likely to experience solitude. (Circle **one** number for each of item.)

	Very Unlikely		Neutral					Very Likely		Don't Know/ Not Sure
	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
See <u>no other people</u>	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
See <u>2 other people per hour</u>	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
See <u>4 other people per hour</u>	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
See <u>8 other people per hour</u>	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
See <u>16 other people per hour</u>	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS

CRWDATT4: The amount of time that passes without seeing other people while [area-specific activity] in places like [NPS site] affects my ability to experience solitude (Circle one number.)

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

CRWDATT5: Please indicate for each of the following lengths of time without seeing other people while [participating in area-specific activity] in [NPS site] how likely you would be to experience solitude during that time. A rating of “-4” means you would be very unlikely to experience solitude within the time period, and a rating of “+4” means you would be very likely to experience solitude within the time period. (Circle **one** number for each item.)

	Very Unlikely		Neutral					Very Likely		Don't Know/ Not Sure
	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
<u>15 minutes</u> without seeing other people	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
<u>30 minutes</u> without seeing other people	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
<u>1 hour</u> without seeing other people	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
<u>2 hours</u> without seeing other people	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS
<u>3 hours</u> without seeing other people	-4	-3	-2	-1	0	+1	+2	+3	+4	DK/NS

CRWDATT6: Please indicate the extent to which you agree or disagree with each of the following statements about [area-specific activity] in [NPS site].. (Circle **one** number for each item.)

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Even if I see several other people while [activity], I can still <u>experience solitude</u> if there are extended periods when I see no other people.	1	2	3	4	5
Even if I see several other people while [activity], I can still <u>experience solitude</u> if most of the other people I see are near the trailhead at the beginning and end of my trip.	1	2	3	4	5
Even if I see several other people while [activity], I can still have a <u>sense of being in wilderness</u> if there are extended periods when I see no other people.	1	2	3	4	5
Even if I see several other people while [activity], I can still have a <u>sense of being in wilderness</u> if most of the other people I see are near the trailhead at the beginning and end of my trip.	1	2	3	4	5

CRWDATT7: The number of other people I saw during my [area-specific activity] today interfered with my sense of solitude. (Circle **one** number, even if you did not see other groups.)

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

CRWDATT8: The number of other people I saw during my [area-specific activity] today interfered with my sense of being in wilderness. (Circle **one** number, even if you did not see other groups.)

- 1 Strongly agree
- 2 Agree
- 3 Neither agree nor disagree
- 4 Disagree
- 5 Strongly disagree

CRWDATT9: We would like to know what you think about issues related to visitor use of [NPS site]. Please indicate the extent to which you agree or disagree with each of the following statements. (Circle **one** number for each statement.)

	Strongly Agree	Agree	Uncertain/ No Opinion	Disagree	Strongly Disagree
[list of items related to number of visitors, group size, and tour specifics (if applicable).]	1	2	3	4	5

CRWDATT10: We would like to know what you think about issues related to the quality of the visitor experience on [NPS site]. Please indicate the extent to which you agree or disagree with each of the following statements. (Circle **one** number for each statement.)

	Strongly Agree	Agree	Uncertain/ No Opinion	Disagree	Strongly Disagree
[area-specific list of items related to visitor experience (e.g. NPS does a good job protecting historic structures, land, or animals.)]	1	2	3	4	5

CROWDATT11: Please indicate how your experience of each of the following items during this overnight backcountry trip affected your sense of being in wilderness. Please mark (●) **only one** for each item.

[The list below is an example of items. The lists of items in individual surveys will depend on the characteristics relevant to that park's backcountry/wilderness.]

	How did it affect your <u>sense of being in wilderness</u> ?				
	Added greatly	Added somewhat	Had no effect	Detracted somewhat	Detracted greatly
The amount of time you were able to hike without seeing other hiking groups.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The number of horseback riding groups you saw while you were hiking on the trails	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not hearing or seeing other groups staying overnight while at your campsite/cabin.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The amount of time during the trip you heard aircraft	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your ability to see dark night skies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The extent to which you were able to see built structures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

CROWDATT12: Please indicate how your experience of each of the following items during this overnight backcountry trip compared with your expectations. (Mark one for each item.)

[The list below is an example of items. The lists of items in individual surveys will depend on the characteristics relevant to that park's backcountry/wilderness.]

	How did it compare to your expectations?					
	A lot more than expected	More than expected	About as expected	Less than expected	A lot less than expected	I had no expectation
The number of hiking groups you saw while you were hiking on the trails	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The number of horseback riding groups you saw while you were hiking on the trails	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The number of groups staying overnight that you could hear or see from your campsite/cabin	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The amount of time during the trip you heard aircraft	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The amount of glow from artificial light in the night-sky	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The extent to which you were able to see built structures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

VISITOR EXPERIENCE AND RESOURCE PROTECTION (VERP)

[Questions in this section are used in Visitor Experience and Resource Protection (VERP) surveys, which may include photographic or audio simulations of different experience settings.]

VERP1: We would like to know how many people you think could visit [area within NPS site] at any one time without feeling too crowded. To help judge this, a series of photographs of the [area within NPS site] is shown in the enclosure in this questionnaire. These photographs show different numbers of visitors in the [area w/in NPS site]

Please rate each photograph by indicating how acceptable you find each one based on the number of visitors shown. A rating of “-4” means the number of visitors is “very unacceptable”, and a rating of “+4” means the number of visitors is “very acceptable”. (Circle **one** number for each photograph.)

	Very Unacceptable					Very Acceptable			
	-4	-3	-2	-1	0	+1	+2	+3	+4
Photo 1	-4	-3	-2	-1	0	+1	+2	+3	+4
Photo 2	-4	-3	-2	-1	0	+1	+2	+3	+4
Photo 3	-4	-3	-2	-1	0	+1	+2	+3	+4
Photo 4	-4	-3	-2	-1	0	+1	+2	+3	+4

VERP2: Which photograph shows the level of use that you would prefer to experience in the [area within NPS site]?

Photo number: _____

VERP3: Which photograph shows the highest level of use that the National Park Service should allow in the [area within NPS site]? In other words, at what point should visitors be restricted from touring the [area w/in NPS site]? If use should not be restricted at any point represented in the photographs, or not restricted at all, you may indicate that by checking one of the box below.

Photo number: _____

- None of the photographs show a level of use high enough to restrict the number of visitors in [area within NPS site]
- The number of visitors in the [area within NPS site] should not be restricted.

VERP4: Which photograph looks most like the number of visitors you typically saw in [area w/in NPS site] today?

Photo number: _____

VERP5: What is the maximum acceptable number of other visitors to see while you are at the [specific park location (e.g. trailhead)]? (*Please fill in a number or mark one of the other two options*)

It is acceptable to see as many as _____ other visitors at the trailhead.

- It doesn't matter to me
- It matters to me, but I cannot specify a number.

VERP6: Please estimate the size (number of individuals) of the typical group that you saw today.

_____ Individuals I can't remember Does not apply

VERP7: We would like you to listen to several short recordings of sounds in [NPS site]. Please rate each recording based on the sounds heard. A rating of “-4” means the sounds are “very unacceptable” and a rating of “+4” means the sounds are “very acceptable”. (Circle one number for each recording.)

	<u>Very Unacceptable</u>					<u>Very Acceptable</u>			
Recording 1:	-4	-3	-2	-1	0	+1	+2	+3	+4
Recording 2:	-4	-3	-2	-1	0	+1	+2	+3	+4
Recording 3:	-4	-3	-2	-1	0	+1	+2	+3	+4
Recording 1:	-4	-3	-2	-1	0	+1	+2	+3	+4

VERP8: Did you find any of the sounds you heard on this recording to be pleasing? (Mark one.)

- Yes
- No

VERP9: If yes, briefly identify or describe the sounds you found pleasing.

Verp10: Did you find any of the sounds you heard on this recording to be annoying? (Mark one.)

- Yes
- No

VERP11: If yes, briefly identify or describe the sounds you found annoying.

VERP12: Which of the recordings you just heard sounds most like what you heard in [NPS site] today? (Mark one.)

- [list of recordings by number]

VERP13: We would like you to listen to a short recording of sounds at [a specific park location]. We would like to know how often you think it would be acceptable to hear the sounds in the recording during your visit to [park location]. To help judge this, we have a series of scenarios that describe how often you would hear the sounds in the recording. Please rate each scenario by indicating how acceptable you find it based on how often you would hear the sounds in the recording. A rating of “-4” means the scenario is “very unacceptable” and a rating of “+4” means the scenario is “very acceptable”. (Circle one number for each recording.)

	Very Unacceptable					Very Acceptable				
Hear the sounds once X minute(s) [list continues with time intervals]	-4	-3	-2	-1	0	+1	+2	+3	+4	

6. EVALUATIONS/OPINIONS OF SERVICES, FACILITIES, AND MANAGEMENT

EVALUATION OF FEES (EVALFEE)

EVALFEE1: Currently no [fee type, e.g., entrance, shuttle, etc.] is charged at [NPS site]. In the future, a [fee type] may be considered, with most [or all] of the funds collected remaining at the park to [explanation of fee uses].

If a fee of \$X were charged in the future, would you and your group be willing to pay it? Please mark (●) **only one**.

- Yes, likely No, unlikely Not sure

EVALFEE2: Currently, the entrance fee to [NPS site] is \$X/7 days per vehicle or \$X/7 days per pedestrian/bike, but not to exceed \$X per family. In your opinion, how appropriate is the fee amount? Please mark (●) **only one**.

- Too low About right Too high

EVALFEE3: Do you think the current fare of \$X is reasonable for this [specific service]? Please mark (●) **only one**.

- Yes, it is reasonable
 No, it is too low
 No, it is too high
 No, there should be no fare

EVALFEE4: How would you and your group rate the value for the entrance fee you paid? Please mark (●) **only one**.

- Very poor Poor Average Good Very good

EVALUATION OF SERVICES/RESOURCES (EVALSERV)

EVALSERV1: Overall, how would you and your group rate the quality of facilities, services, and recreational opportunities at [NPS site] during this visit? Please mark (●) **only one**.

- Very poor Poor Average Good Very good

EVALSERV2: In your opinion, what information on the park website needs enhancement? Please mark (●) **all** that apply.

Did not use park website/no opinion

Needs enhancement

Other (Please specify below)

a) _____ b) _____

EVALSERV3: Inside the park, were the signs directing you and your group to facilities and sites adequate?

No Yes

EVALSERV4: If NO, what would have helped you to find your way?

EVALSERV5: What did you and your group like **most** and **least** about [NPS site] visitor center and outdoor exhibits?

Visitor center exhibits Did not use

Liked most: _____

Liked least: _____

Outdoor exhibits Did not use

Liked most: _____

Liked least: _____

EVALSERV6: How would you and your group rate the quality of your experience in the backcountry of [NPS site]? Please mark (●) **only one**.

Very poor Poor Average Good Very good

EVALSERV7: Is there anything you and your group would like to see changed in the way the backcountry is managed?

EVALSERV8: Please indicate which of the following statements best describes your impression of the night-sky during this overnight backcountry trip. Please mark (●) **only one**.

The darkness of the night-sky and brilliance of stars and planets were...

- Not at all affected by artificial light glow
- Slightly affected by artificial light glow
- Moderately affected by artificial light glow
- Very affected by artificial light glow
- Extremely affected by artificial light glow
- Don't remember

EVALSERV9: On this trip to [NPS site], did you or any members of your group use the following reservation services? Please mark (●) **all** that apply in the left column.

For **each** reservation service that you and your group **used**, please rate its quality using a scale from 1-5 of each of the following features.

Used service?

b) If used, what quality?

1= Very poor	2= Poor	3= Average
4= Good	5= Very good	

mark (●)	Sufficiency of information provided	Efficiency of service	Ease of use	Accuracy of reservation/ permit
<input type="radio"/> [area-specific list of reservation services]	_____	_____	_____	_____

EVALSERV10: If you or your group used any of the above services, please describe any changes you would recommend to the current system.

Service	Recommend changes
---------	-------------------

EVALSERV11: a) On this visit to [NPS site], which of the following commercial services did you and your group use?

- b) If you and your group used lodging, campsites and/or restaurants/food service, were you able to get your first choice of location?
- c) Did the commercial services that you and your group used meet your expectations? Please circle one answer.
- d) Please rate the value (from 1 to 5) of the commercial services you and your group used for the money you paid.

a) Use service?	Commercial service	b) Did you get your first choice?		c) Meet expectations?		
		Yes	No	1	2	3
<input type="radio"/>	[Area-specific list of commercial services (e.g. campgrounds, purchase gas, medical services)]					

1=Worse than expected
 2=About what was expected
 3=Better than expected
 Circle one.

Circle one.

EVALSERV12: Please explain any "no" or "worse than expected" responses in columns b and c of this question. _____

EVALSERV13: Please explain any ratings of "very poor" or "poor" in column d of this question. _____

EVALSERV14: Please explain any ratings of "very good" in column d of this question. _____

EVALSERV15: Please indicate how the following elements may have affected you and your personal group's dining or shopping experience in [NPS site]. Please mark (●) **one** for each.

Element	Very poor	Poor	Average	Good	Very good
[area-specific food-service elements]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
[area-specific gift-shop elements]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

EVALSERV16: Please make any comments about the above elements. For example, if you were unable to find an item you wanted, please list it below.

Element	Comment
_____	_____
_____	_____
_____	_____

EVALSERV17: On this visit, were the signs directing you to [NPS site] adequate? Please mark (●) **only one** response for each.

- Signs on interstates Yes No Not sure
- Signs on state highways Yes No Not sure
- Signs in communities Yes No Not sure

EVALSERV18: If you answered NO to any of the above, please explain the problem.

EVALSERV19: Please indicate how safe you and your group felt from crime, accidents, and natural hazards during this visit to [NPS site]? Please mark (●) **only one** response for each safety issue.

How safe did you feel in the park?

Safety Issue	Very Unsafe	Somewhat Unsafe	Neither Safe nor Unsafe	Somewhat Safe	Very Safe
[area-specific list of safety issue (e.g. theft, crime, accidents)]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

EVALUSERV20: If you marked 'very unsafe' or 'somewhat unsafe' on any of the above items, please explain why:

EVALSERV21: Please mark (●) **all** the visitor services and facilities that you and your group used during this visit to [NPS site].

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

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

a) Used service/facility?	b) If used, how important? 1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremelv important	c) If used, what quality? 1=Very poor 2=Poor 3=Average 4=Good
<input type="radio"/> [area-specific list of services/facilities]	_____	_____

EVALSERV22: Please rate how satisfied you and your group were with your tour reservation-making experience. Please mark (●) **only one**.

Very poor	Poor	Average	Good	Very good
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you rated the reservation-making experience as "very poor" or "poor," what problems did you encounter? _____

EVALSERV23: Please rate the quality of your interaction with [park rangers, volunteers, concession employees] in [NPS site]. Please mark (●) **one** for each.

	Very poor	Poor	Average	Good	Very good
Helpfulness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Courteousness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of information provided	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

EVALSERV24: What did you and your group like **least** about your visit to [NPS site]?

EVALSERV25: What did you and your group like **most** about your visit to [NPS site]?

EVALSERV26: Would you recommend visiting [NPS site] to others?

Yes

No

EVALSERV27: If YES, please explain why.

EVALSERV28: If NO, please explain why.

EVALUATION OF TRANSPORTATION (EVALTRAN)

EVALTRAN1: We would like to know how you feel about using different kinds of transportation in [NPS site]. For each item below, FIRST rate how much you think it describes the form of transportation you used to enter the park. THEN rate how much you think it describes the park shuttle bus. Please answer this last part even if you have not yet used the shuttle bus system.

	Vehicle you used to enter the park				[NPS site] Shuttle			
	1= Strongly Agree 2= Agree 3= Disagree 4= Strongly Disagree				1= Strongly Agree 2= Agree 3= Disagree 4= Strongly Disagree			
[possible characteristics of transportation (such as easy access to personal belongings, affordable, sense of freedom)]	1	2	3	4	1	2	3	4

EVALTRAN2: Overall, what is your attitude toward the use of alternative transportation for visitor travel once inside U.S. National Parks, which includes modes of travel other than private automobiles, such as bicycle, bus, boat, carriage, ferry, train, tram, trolley, or van?

Very Favorable Favorable Unfavorable Very Unfavorable

EVALTRAN3: How frequently would a bus need to pass by a stop (pick-up point) for you to consider using the service in [NPS site]? (check only one)

[list of time intervals]

EVALTRAN4: How important are the following features for a transit (bus) service within [NPS site]?

[list of features (on-time service, frequency of service, ability to access trailheads, ability to bring gear with me, green technology)]

Very Important Important Somewhat Important Neutral Somewhat Unimportant Unimportant Very Unimportant

EVALTRAN5: Please rate the shuttle service on each of the following:

	Very Good	Good	Fair	Poor	Very Poor	No Opinion
[list of services/features (e.g. on-time performance, frequency, etc)]	○	○	○	○	○	○

EVALTRAN6: What improvements would make you more likely to use this shuttle again in the future? Please mark (●) **all** that apply.

- [area-specific list of improvements (e.g. more frequent service, greener technology, more stops, etc)]

OPINIONS ON PARK MANAGEMENT (OPMGMT)

OPMGMT1: Please indicate the extent to which you would support or oppose each of the following potential management actions at [NPS site]. (Mark one number for each item.)

	Strongly Support	Support	Neither Support nor Oppose	Oppose	Strongly Oppose	Don't Know/ Not Sure
[list of actions (e.g. require visitors to ride a free shuttle bus, prohibit specific activities, remove specific existing facilities, etc.)]	○	○	○	○	○	DK

OPMGMT2: How much of a problem do you think the following issues are at [NPS site]? Please mark (●) **one** for each

	Not a Problem	Small Problem	Big Problem	Don't Know/ No Opinion
[area-specific list of issues (e.g. too many buses on the road; lack of visitor facilities; difficulty locating the trail, etc)]	1	2	3	DK

OPMGMT3: Please rate how appropriate you feel the following activities are in [NPS site]. Please mark (●) **one** for each activity.

Activity	Never appropriate	Sometimes appropriate	Usually appropriate	Always appropriate
[area-specific list of activities (e.g. playing Frisbee, sunbathing, bicycling on trails, etc)]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OPMGMT4: It is the National Park Service’s responsibility to protect this park’s natural and cultural resources/attributes and visitor experiences that depend on these. How important is the protection of the following to you and your group? Please mark (●) **only one** answer for each resource/attribute/experience.

Resource/attribute	Not important	Somewhat important	Moderately important	Very important	Extremely important
[area-specific list of site features]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Interpretive/informational programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clean water	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clean air	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Scenic views	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Solitude	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Natural quiet/sounds of nature	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Native plants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wildlife	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

OPMGMT5: By completing this questionnaire, you are planning for the future of [NPS site]. What would you and your group propose? Please be specific.

OPMGMT6: If you were a park manager planning for the future of [NPS site], what would you propose? Please be specific.

OPMGMT7: Is there anything else you and your group would like to tell us about your visit to [NPS site]?

TRUST IN THE NPS (TRUST)

TRUST1: Do you trust [NPS site] to manage the following? Please mark (●) **one** for each.

	Yes	No	Don't Know
[area-specific list of items, e.g., fishing trails, fires, forest health, water quality, wildlife, motorized use, overnight use, parking, safety, etc.]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TRUST2: How much do you trust the National Park Service? Please mark (●) **one** for each.

	Not at all	A little	Some	A lot	Don't know
At the national level?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At [NPS site]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TRUST3: Over time, how has your level of trust in the [NPS site] staff changed? Please mark (●) **only one**.

Worsened
 Has not changed
 Improved
 Don't know