**Non-Response Telephone Interview Form**

Hello. This is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ calling from the Eppley Institute at Indiana University regarding your recent trip to Assateague Island National Seashore in Maryland. Could I speak to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_?

(If not available) Could I arrange a time to call back?

(If available) I am working with the National Park Service to try to better understand experiences of oversand vehicle [backcountry] users at Assateague Island. I know you may have been too busy to fill out the questionnaire that was mailed to you, but I wondered if you could spend about 5 minutes now with me answering two key questions?

(IF NO, FIND OUT WHEN IT WOULD BE CONVENIENT TO CALL AGAIN.)

INTERVIEW: Before we begin, I want to assure you that the U.S. Office of Management and Budget has approved this research under the Paperwork Reduction Act, and the control number and expiration date, as well as additional information about this survey and its approval are available at your request.\* All of your answers are completely voluntary and your responses will be anonymous.

FOR OSV ZONE USERS

1. About how many annual Assateague Island National Seashore Oversand Vehicle Zone permits have you purchased in the last 10 years? \_\_\_\_\_\_ # permits
2. Please rate your overall satisfaction or dissatisfaction with your oversand vehicle experience(s) during the past 12 months.

\_\_\_\_Highly satisfied

\_\_\_\_Satisfied

\_\_\_\_Neither satisfied nor unsatisfied

\_\_\_\_Unsatisfied

\_\_\_\_Highly unsatisfied

FOR BACKCOUNTRY USERS

1. About how many annual Assateague Island National Seashore backcountry permits have you purchased in the last 10 years? \_\_\_\_\_ # permits
2. Please rate your overall satisfaction or dissatisfaction with your backcountry experience(s) during the past 12 months.

\_\_\_\_\_Highly satisfied

\_\_\_\_\_Satisfied

\_\_\_ \_ Neither satisfied nor unsatisfied

\_\_\_\_\_Unsatisfied

\_\_\_\_\_ Highly unsatisfied

**\*Additional Information Provided upon Request.**

OMB Approval number: *(Not yet assigned)*

Expiration Date: *(Not yet assigned)*

Person Collecting and Analyzing Information:

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