

Instrument B – Transportation Effects on Soundscape Experience – MORA

2011

National Park Service

MOUNT RAINIER NATIONAL PARK VISITOR SURVEY

Thank you for agreeing to participate! This questionnaire should take about 15 minutes to complete. Your participation in the survey is completely anonymous and voluntary, but since only a select number of people are being asked to participate, your cooperation is extremely important. The National Park Service will use your responses to better serve the visitors to Mount Rainier National Park.

Introduction

Welcome to the National Park Service visitor's experience questionnaire. Your answers will inform National Park managers about visitors' experiences at many different types of natural, cultural and historical sites in the United States. This questionnaire asks about your experiences during this visit to Mount Rainier National Park

Please wait to begin until the interviewer provides instructions on the first page.

1. Have you visited Mount Rainier National Park before today? [Topic Area 1. VISITTHIS1]

No.....

Yes.....

a. If YES, approximately how many times have you visited Mount Rainier during the last 12 months, including this visit?



Number of prior visits _____ (approximate)

Don't know /not sure.....

2. During this visit to Mount Rainier, did you go to any of the following locations? If you did not go to a site, please indicate this. [Topic Area 3. VARIATION ITIN3]

<i>REVISION NOTE: This question must be individually formatted for each site. Identifying locations within the site may require maps, photos or other aids in addition to names.</i>	Went to ▼	Did not go to or Not sure ▼
a. Paradise	<input type="checkbox"/>	<input type="checkbox"/>
b. Longmire	<input type="checkbox"/>	<input type="checkbox"/>
c. Sunrise.....	<input type="checkbox"/>	<input type="checkbox"/>
d. White River	<input type="checkbox"/>	<input type="checkbox"/>
e. Ohanapecosh	<input type="checkbox"/>	<input type="checkbox"/>
f. Carbon River	<input type="checkbox"/>	<input type="checkbox"/>
g. Mowich Lake	<input type="checkbox"/>	<input type="checkbox"/>
h. Other location [Please describe.]	<input type="checkbox"/>	<input type="checkbox"/>

3. On this visit, what activities have you and your group participated in while at Mount Rainier? Please check all that apply. **[Topic Area 3. ACT22]**

		Take part ▼	Did not take part ▼
a.	Viewing the scenery	<input type="checkbox"/>	<input type="checkbox"/>
b.	Viewing a sunrise or sunset.....	<input type="checkbox"/>	<input type="checkbox"/>
c.	Picnicking or having a meal.....	<input type="checkbox"/>	<input type="checkbox"/>
d.	Watching birds	<input type="checkbox"/>	<input type="checkbox"/>
e.	Viewing wildlife (other than birds).....	<input type="checkbox"/>	<input type="checkbox"/>
f.	Hiking or walking	<input type="checkbox"/>	<input type="checkbox"/>
g.	Camping	<input type="checkbox"/>	<input type="checkbox"/>
h.	Entering a visitor center, lodge, store or other building.....	<input type="checkbox"/>	<input type="checkbox"/>
i.	Attending a ranger-led talk, walk, or campfire program.....	<input type="checkbox"/>	<input type="checkbox"/>
j.	Attending some other demonstration, talk or other organized activity or performance [Please describe.]	<input type="checkbox"/>	
			
k.	Other activity [What activity?].....	<input type="checkbox"/>	
			

4. How important are the following experiences to you on this visit to Mount Rainier National Park? Mark one response for each experience. **[Topic Area 4. PREF1]**

[Topic Area 6. Individual Perceptions of their Park Experiences]

Experience:	Not important ▼	Somewhat important ▼	Moderately important ▼	Very important ▼	Extremely important ▼
a. View the natural scenery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Enjoy the natural quiet and sounds of nature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Appreciate the history and cultural significance of the site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Experience a sense of adventure or challenge...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. During this visit to Mount Rainier how much did you... [Topic Area 6. Individual Perceptions of their Park Experiences]

	<i>Not relevant</i> ▼	Not at all ▼	Somewhat ▼	Moderate amount ▼	Very much ▼	Extreme amount ▼
a. Appreciate the natural scenery.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Enjoy the natural quiet and sounds of nature.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Appreciate the history and cultural significance of the site.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Experience a feeling of calmness, peace or tranquility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Experience a sense of adventure or challenge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For the next question, please

Step 1: Please mark (v) each sound that you heard during your visit to the site today (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).

Step 2: Under the **ACCEPTABILITY OF SOUNDS** 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 3: 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.

Step 4: Under the **EFFECT OF SOUNDS** column, please circle one number which best describes the effect this sound had on your experience: The scale is on a continuum from: -4 as detracted greatly, - 2 as detracted somewhat, 0 as neutral, +2 as added somewhat, and + 4 as added greatly.

6. Answer Question A, B, and C about each of the sounds you heard during this visit to Mount Rainier. [Topic Area 4. VARIATION SOUND9]

SOUNDS	Heard the sound	A. How acceptable or unacceptable was this sound?										B. How much did this sound please or annoy you?										C. How much did this sound positively add to or negatively detract from your experience									
		Acceptability of Sounds										Personal Interpretation of Sounds										Effect of Sounds on Your Experience									
		--Unacceptable--					--Acceptable--					--Annoy--					--Please--					Negatively detract					--Positively add -				
		Extremely	Very	Moderately	Slightly	Neutral	Slightly	Moderately	Very	Extremely	Extremely	Very	Moderately	Slightly	Neutral	Slightly	Moderately	Very	Extremely	Extremely	Very	Moderately	Slightly	Neutral	Slightly	Moderately	Very	Extremely			
a. Insect sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Sounds of other small animal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Sounds of large animals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Bird song	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Bird chatter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Frog sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Animal sounds (unknown)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Waterfalls, running water, or waves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

i. Rain or thunder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Wind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Wind through trees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Group of people talking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. People shouting or speaking loudly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Walking sounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Someone's radio or TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Someone's iPod or other audio device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Someone's cell phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Motorcycles in a parking lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Motorcycles on a road or highway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. Cars or trucks in a parking lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u. Cars or trucks on a road or highway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Airplanes (propeller)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
w. Jets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x. Helicopters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
y. Motorboats or other motorized watercraft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
z. Engine (unknown)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
aa. Park trail work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
bb. Park maintenance activities (besides trail work)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Did you hear propeller-driven airplanes, jets, helicopters, or any other aircraft during this visit to Mount Rainier? [Topic Area 6. Individual Perceptions of their Park Experiences]

Yes - heard.
 No – did not hear → Skip to #10 on page 8.

8. During this visit to Mount Rainier, how much did sounds from airplanes, jets, helicopters or other aircraft annoy you? [Topic Area 6. Individual Perceptions of their Park Experiences]

Not at all.....
 Slightly
 Moderately
 Very.....
 Extremely

9. On this visit to Mount Rainier, how did the sounds of aircraft affect your ability to experience each of the following? Mark only one response for each item. [Topic Area 4-SOUND3]

	Did not experience ▼	Detracted from ▼	No effect ▼	Added to ▼
a. Enjoyment of the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Appreciation of the natural quiet and sounds of nature at the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Appreciation of the historical and cultural significance of the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please explain any “detracted from” responses to this question.

10. Did you hear cars, buses, trucks, or other motor vehicles during this visit to Mount Rainier? [Topic Area 6 – Individual Perceptions of their Park Experiences]

Yes - heard.

No –did not hear → Skip to #13 on page 9.

11. During this visit to Mount Rainier, how much did sounds from cars, buses, trucks, or other motor vehicles annoy you? [Topic Area 6 – Individual Perceptions of their Park Experiences]

Not at all.....

Slightly.....

Moderately

Very.....

Extremely

12. On this visit to Mount Rainier, how did the sounds from vehicles affect your ability to experience each of following? Mark only one response for each item. [Topic Area 4 - SOUND3]

	Did not experience ▼	Detracted from ▼	No effect ▼	Added to ▼
d. Enjoyment of the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Appreciation of the natural quiet and sounds of nature at the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Appreciation of the historical and cultural significance of the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please explain any “detracted from” responses to this question.

13. Did you hear sounds other visitors made during this visit to Mount Rainier? [Topic Area 6 – Individual Perceptions of their Park Experiences]

Yes - heard.
 No – did not hear → Skip to #16 on page 10.

14. During this visit to Mount Rainier, how much did sounds other visitors made annoy you? [Topic Area 6 – Individual Perceptions of their Park Experiences]

Not at all.....
 Slightly
 Moderately
 Very.....
 Extremely

15. On this visit to Mount Rainier, how did the sounds of other visitors affect your ability to experience each of following? Mark only one response for each item. [Topic Area 4 -SOUND3]

	Did not experience ▼	Detracted from ▼	No effect ▼	Added to ▼
g. Enjoyment of the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Appreciation of the natural quiet and sounds of nature at the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Appreciation of the historical and cultural significance of the site (NOTE: “Comet Falls” or “Clover Lake” will be specified in site-specific printings of the questionnaire).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please explain any “detracted from” responses to this question.

Background Information

16. How many adults and children are in your personal group (spouse, family, friends) on this visit to Mount Rainier? [Topic Area 1 - VARIATION GRP3]

Adults (age 16 or over) _____Number

Children (age 15 or under) _____Number

17. On this visit, are you and your personal group with the following types of groups? [Topic Area 1 -GRP6]

Guided tour group... Yes No

School/educational group... Yes No

Other organized group... Yes No

18. What is your gender? [Topic Area 1 -GEND2]

Male

Female.....

19. In what year were you born? [Topic Area 1 - AGE1]

Year

1	9				
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20. Where do you live? [Topic Area 1- VARIATION RES1]

United States → What is your Zip code? →

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Another country → What country do you live in? →

21. What is the highest level of formal education you have completed? [Topic Area 1 -VARIATION ED1]

Some high school.....

High school diploma or GED.....

Some college, business or trade school.....

College, business or trade school graduate.....

Some graduate school.....

Graduate degree

22. Are you Hispanic or Latino? [Topic Area 1 - RACE/ETH2]

Yes

No.....

23. What is your race? (Check one or more.) [Topic Area 1 - RACE/ETH3]

American Indian or Alaska Native.....

Asian

Black or African American.....

Native Hawaiian or other Pacific Islander

White.....

Please give your questionnaire to the interviewer.

Thank you for completing the survey!

PRIVACY ACT and PAPERWORK REDUCTION ACT statement: 16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. The permanent data will be anonymous. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. BURDEN ESTIMATE statement: Public reporting burden for this form is estimated to average 15 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to: Barbara Samora, Natural Resource Manager, Mount Rainier National Park, 55210 238th Avenue East, Ashford, WA 98304, Barbara_Samora@nps.gov.