



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

Visitor Services Project

2012 Visitor Study

INSERT PHOTO HERE

**United States Department of the Interior**

NATIONAL PARK SERVICE

[SPECIFY PARK NAME]

Address



Date, 2012

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the expectations, opinions, and interests of visitors to **[SPECIFY PARK NAME]**. This information will assist us in our efforts to better manage this park and to serve you.

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

When your visit is over, please complete this questionnaire. Seal it in the postage-paid envelope provided and drop it in any U.S. Postal mailbox.

If you have any questions, please contact Lena Le, VSP Assistant Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-2585, lenale@uidaho.edu (email).

We appreciate your help.

Sincerely,

[insert signature]





Name

Superintendent

DIRECTIONS

At the end of your visit:

1. Please have the selected individual (at least 16 years old) complete this questionnaire.
2. Read each the question carefully since each question is different.
3. For questions that use circles (O), please mark your answer by filling in the circle with **black or blue ink**. Please do not use pencil.

Like this: ● Not like this:    

4. Seal it in the postage-paid envelope provided.
5. Drop it in a U.S. Postal mailbox.

Paperwork Reduction Act Statement: The National Park Service is authorized by 16 U.S.C. 1a-7 to collect this information. This information will be used by park managers to understand the visitor use and to evaluate visitor services here at [SPECIFY PARK NAME]. Responses to this request are voluntary and anonymous. Your name will never be associated with your answers, and all contact information will be destroyed when the data collection is concluded. No action may be taken against you for refusing to supply the information requested. 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 and expiration date.

BURDEN ESTIMATE STATEMENT: Public reporting burden for this form is estimated to average 10 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to: Lena Le, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; lenale@uidaho.edu (email).

NOT TO OMB REVIEWERS: For the purposes of this review and submission the justifications for each question or section of questions is highlighted in a shaded text box above each question. These text boxes will not be printed on the final version of the surveys. The Topic Areas noted are consistent with the currently approved pool questions for the NPS Programmatic Review Process (1024-0224 – Current Expiration Date: 8-31-2014). The questions that are slight variations are denoted as such. Any questions that are outside the general scope of the programmatic review process have been carefully discussed and generally approved by the NPS Information Collection Review Coordinator with understanding that those questions will require further review and consideration by OMB before full determination and approval can be granted.

2012 Visitor Survey

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

TOPIC AREA 2 - TPLAN1

1. a) Prior to this visit, how did your personal group obtain information about **[SPECIFY PARK NAME]**? Please mark (•) all that apply in column (a).
 - Did not obtain information prior to visit → **Go to part (b) of this question**
- b) If you were to visit **[SPECIFY PARK NAME]** in the future, how would your personal group prefer to obtain information about the park? Please mark (•) all that apply in column (b).
- c) For the sources of information that you used to plan your visit to **[SPECIFY PARK NAME]**, please rate their importance in planning your trip.

a) This visit	b) Future visit	Source of information	c) How important?
<input type="radio"/>	<input type="radio"/>	Friends/relatives/word of mouth	1= Not at all important
<input type="radio"/>	<input type="radio"/>	Inquiry to park via phone, mail, or email	2= Slightly important
<input type="radio"/>	<input type="radio"/>	[SPECIFY PARK NAME] website: www.nps.gov/	3= Moderately important
<input type="radio"/>	<input type="radio"/>	Other websites — Which one(s)?	4= Very important
<input type="radio"/>	<input type="radio"/>	_____	5= Extremely important
<input type="radio"/>	<input type="radio"/>	Local businesses (hotels, motels, restaurants, etc.)	_____
<input type="radio"/>	<input type="radio"/>	Maps/brochures	_____
<input type="radio"/>	<input type="radio"/>	Newspaper/magazine articles	_____
<input type="radio"/>	<input type="radio"/>	Other units of the National Park System (NPS)	_____
<input type="radio"/>	<input type="radio"/>	Previous visits	_____
<input type="radio"/>	<input type="radio"/>	School class/program	_____
<input type="radio"/>	<input type="radio"/>	Social media (such as Facebook, Twitter, etc.)	_____
<input type="radio"/>	<input type="radio"/>	State welcome center/visitors bureau/chamber of	_____

		commerce	
<input type="radio"/>	<input type="radio"/>	Television/radio programs/DVDs	_____
<input type="radio"/>	<input type="radio"/>	Travel guides/tour books (such as AAA, etc.)	_____
<input type="radio"/>	n/a	Other, this visit (Specify)	_____
n/a	<input type="radio"/>	Other, future visit (Specify)	_____

TOPIC AREA 2 – TPLAN2

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

- No Yes → **Go to Question 2**

TOPIC AREA 2 – TPLAN3

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

Topic AREA 1 - KNOW2

2. Prior to receiving this questionnaire, were you and your personal group aware that [**SPECIFY PARK NAME**]? is a unit of the National Park Service?

- Yes No

TOPIC AREA 3 – TRIPC8

3. On this visit, how much **total** time (both on land and on the river) did your personal group spend visiting [**SPECIFY PARK NAME**]? Please list partial hours or days as ¼, ½, or ¾.

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

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

TOPIC AREA 1 – RES2

4. a) Were **all** members of your personal group residents (year round or part time) of the [**SPECIFY PARK NAME**] area (within 50 miles of the park)?

- No Yes → **Go to Question 5**

TOPIC AREA 3 – TRIPC1

b) For non-residents of the area (within 50 miles drive of park) on this trip, what was the primary reason your personal group came to the [**SPECIFY PARK NAME**] area? Please mark (•) **one**.

- Visit [**SPECIFY PARK NAME**]
- Visit [other federal sites]
- Visit other attractions in the area

- Visit friends/relatives in the area
- Business
- Just passing through to another destination
- Other (Please specify) _____

TOPIC AREA 3 – TRIPC3

5. a) On this trip, did your personal group stay overnight away from home inside [**SPECIFY PARK NAME**] or in the area (within 50 miles of any entrance point)?

- Yes
- No → **Go to Question 6**

b) If YES, please list the number of nights your personal group stayed inside [**SPECIFY PARK NAME**] and in the local area (within 50 miles of any entrance point).

Number of nights inside [**SPECIFY PARK NAME**] _____

Number of nights in [**SPECIFY PARK NAME**] area (within 50 miles) _____

c & d) In which type(s) of accommodations did your personal group spend the night(s) inside the park and in the local area? Please mark (•) all that apply.

<u>Accommodation</u>	c) Inside park	d) Outside park
Lodge, motel, rented condo/home, cabin, B&B	n/a	O
Residence of friends or relatives	O	O
RV/trailer/tent camping in a developed campground	O	O
Backcountry camping	O	O
Personal seasonal residence	O	O
Other (Please specify below)	O	O

c) Inside park _____ d) Outside park _____

TOPIC AREA 1 – KNOW1

6 a) Prior to visit, were you aware of the history of this site? [**SPECIFY PARK NAME**]? Please mark (•) **Yes or No** for each site.

TOPIC AREA 3 – ITIN1

b) Have you ever visited these sites before? Will you plan to visit again in the future? Please mark (•) all that apply for each site.

a) Aware of the history of this site:		b) Visitation history		
Yes	No	I've visited this site in the in the past	This is my first time visiting this site	I will plan a trip to visit this site again in the future

- Name of site
 Name of site

TOPIC AREA 2 – TPLAN15

c. How important were the following factors in your personal group’s decision to visit [**SPECIFY PARK NAME**]? Please mark (•) **one** for each factor.

	Not at all important	Slightly important	Moderately important	Very important	Extremely important
A national park site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A [specific content] related site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A place to get off the highway	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Something else to do while we were in the area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TOPIC AREA 3 – FVIS1 (Variation)

7. a) For you only, if you had been unable to visit [**SPECIFY PARK NAME**] on this trip, would you have visited another time?

- Yes, likely No, unlikely

TOPIC AREA 3 – TRIPC2 (Variation)

b) If NO, what would you have done with the time you spent on this trip? Please mark (•) one.

- Gone somewhere else → Go to Part c
 Stayed home
 Gone to work at your regular job
 Not sure/None of these

TOPIC AREA 3 – TRIPC2

c) How far from your home is the place you would have gone instead of [**SPECIFY PARK NAME**]?

- Number of miles Don't know/don't remember

TOPIC AREA 3 – TRANS1

8. a) What was your primary method of transportation for getting from your home to the [**SPECIFY PARK NAME**] area? Please mark (•) one.

- Car Motorcycle SUV/truck/van
 Motorhome Airplane
 Other (Please specify)

TOPIC AREA 2 – TPLAN5

b) What was your primary destination on this trip?

[SPECIFY PARK NAME] OR Location

(Place, city, & state)

TOPIC AREA 3 – ITIN1

9. On this visit to **[SPECIFY PARK NAME]**, please mark (●) **all** the sites within the park that your personal group visited on the map below.

Place holder for map

The sites will be inserted in the **[SPECIFY PARK NAME]** map.

TOPIC AREA 6 – EVALSERV4

10. On this visit, were the signs directing your personal group to and around [Park name] adequate? Please mark (●) **one** answer for each of the following.

- | | | | | | | |
|-------------------------------|-----------------------|-----|-----------------------|----|-----------------------|-------------|
| a) Interstate signs | <input type="radio"/> | Yes | <input type="radio"/> | No | <input type="radio"/> | Did not use |
| b) State highway signs | <input type="radio"/> | Yes | <input type="radio"/> | No | <input type="radio"/> | Did not use |
| c) Signs in local communities | <input type="radio"/> | Yes | <input type="radio"/> | No | <input type="radio"/> | Did not use |
| d) Signs in the park | <input type="radio"/> | Yes | <input type="radio"/> | No | <input type="radio"/> | Did not use |

TOPIC AREA 6 – EVALSERV5

e) If you answered NO for any of the above, please explain.

Interstate _____

State highway _____

In local communities _____

In park _____

TOPIC AREA 5 – CROWD9

11. How much of a problem to you feel traffic congestion is at different locations in [SPECIFY PARK NAME]. Please mark (●) one response for each location.

Location	Not a problem	Small problem	Big problem
At the park entrance/exit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Driving on park roads	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In parking areas at primary destinations (list of places.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At scenic overlooks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TOPIC AREA 6 - OPNMGMT4

12. It is the National Park Service’s responsibility to protect [SPECIFY PARK NAME] natural, scenic, and cultural resources while at the same time providing for public enjoyment. How important is protection of the following resources/attributes in the park to you and your personal group? Please mark (●) one answer for each resource/attribute.

Resource/attribute	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Clean air (visibility)	<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"/>
Clear night sky	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Backcountry	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developed recreation facilities (campground, trails, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Educational opportunities	<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"/>
Native wildlife	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Natural features (such as arches, bluffs, streams)	<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"/>
Recreational opportunities	<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"/>

TOPIC AREA 3 – ACT1

13. a) On this visit, in which activities did your personal group participate within [SPECIFY PARK NAME]? Please mark (●) all that apply in column (a).

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

a) This visit	b) Future visit	Activity
<input type="radio"/>	<input type="radio"/>	Attending ranger-led talks/programs
<input type="radio"/>	<input type="radio"/>	Birdwatching/wildlife viewing/wildflower viewing
<input type="radio"/>	<input type="radio"/>	Camping
<input type="radio"/>	<input type="radio"/>	Climbing
<input type="radio"/>	<input type="radio"/>	Fishing
<input type="radio"/>	<input type="radio"/>	Hiking/walking
<input type="radio"/>	<input type="radio"/>	Hunting/trapping
<input type="radio"/>	<input type="radio"/>	Obtaining National Park passport stamp
<input type="radio"/>	<input type="radio"/>	Overnight backpacking
<input type="radio"/>	<input type="radio"/>	Participate in Junior Ranger program
<input type="radio"/>	<input type="radio"/>	Picnicking
<input type="radio"/>	<input type="radio"/>	Shopping in park bookstore (at visitor center)
<input type="radio"/>	<input type="radio"/>	Stop at scenic overlooks
<input type="radio"/>	<input type="radio"/>	Swimming
<input type="radio"/>	<input type="radio"/>	Water sport (rafting, canoeing, kayaking, etc.)
<input type="radio"/>	n/a	Other – this visit (Specify below)
n/a	<input type="radio"/>	Other – future visit (Specify below)

TOPIC AREA 6 – EVALSERV13

14. a) Please mark (●) **all** services and facilities that your personal group **used** at [**SPECIFY PARK NAME**] during this visit.
- b) For only those services and facilities that your personal group **used**, please rate their importance to your visit from 1-5.
- c) For only those services and facilities that your personal group **used**, please rate their quality from 1-5.

a) Information services/facilities used? Mark (●)	b) If used, how important? 1=Not at all important 2=Slightly important 3=Moderately important 4=Very important 5=Extremely important	c) If used, what quality? 1=Very poor 2=Poor 3=Average 4=Good 5=Very good
<input type="radio"/> Assistance from park staff	_____	_____
<input type="radio"/> Bookstore sales items (selection, price, etc.)	_____	_____
<input type="radio"/> Campground	_____	_____
<input type="radio"/> Junior Ranger program	_____	_____
<input type="radio"/> Park brochure/map	_____	_____
<input type="radio"/> Park newspaper	_____	_____
<input type="radio"/> Park website: www.nps.gov/ used before or during visit	_____	_____
<input type="radio"/> Ranger-led programs	_____	_____
<input type="radio"/> Toilet facilities	_____	_____
<input type="radio"/> Trails	_____	_____
<input type="radio"/> Visitor center exhibits	_____	_____
<input type="radio"/> Visitor center (overall)	_____	_____

TOPIC AREA 3 – FVIS16

15. If you were to visit [**SPECIFY PARK NAME**] in the future, what additional facilities would personal group like to have available? Please be specific.

TOPIC AREA 3 – FVIS19

16. If your personal group were to visit [**SPECIFY PARK NAME**] in the future, what would you like to have available for purchase at the visitor center bookstore?

- None
- Additional publications (books, brochures, maps, etc.)
List subject that you are interested in _____
- Convenience items (disposable cameras, batteries, bottled water, etc.)
- Souvenir items (tee shirts, etc.)
- Other (Please specify) _____

TOPIC AREA 3 – ACT7

17. a) On this visit to [**SPECIFY PARK NAME**], did you and your personal group attend any ranger-led programs/talks?

- Yes No

TOPIC AREA 6 – EVALSERV22

If YES, please rate the following aspects of the program/talk. Please mark (•) **one** for each aspect.

- b) Program length Too short About right Too long
- c) Topics discussed on program Of interest NOT of interest

TOPIC AREA 6 – EVALSERV20

d) Is there any aspect of the story that needs to be strengthened?

- No
- Yes → Please be specific. _____
-

TOPIC AREA 3 – FVIS7

18. a) If your personal group were to visit [**SPECIFY PARK NAME**] in the future, please list any ranger-led program that you would like to have available. Please be specific.

- Not interested in any program → **Go to Question 19**

TOPIC AREA 3 – FVIS8

b) What length of ranger-led program would your personal group like to attend? Please mark (.) **one** for each program.

a) Program	b) Preferred program length			
	Under ½ hour	½-1 hour	1-2 hours	More than 2 hours
_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
_____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TOPIC AREA 3 – FVIS11

c) What time of the day would be most suitable for you to attend a ranger-led program/talk?

- Between 8am and 10am
- After noon to 2pm
- Other (Please specify) _____
- Between 10am and noon
- Between 2pm to 4pm

TOPIC AREA 6 – EVALSERV1

19. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to your personal group at **[SPECIFY PARK NAME]** during this visit? Please mark (.) **one**.

- Very poor
 - Poor
 - Average
 - Good
 - Very good
-

TOPIC AREA 7 – ECON4

20. For your personal group, please estimate all expenditures for the items listed below for this visit to **[SPECIFY PARK NAME]** and the surrounding area (within 50 miles of any entrance point). **Please write "0" if no money was spent in a particular category.**

- a) Please list your personal group's total expenditures inside **[SPECIFY PARK NAME]**
- b) Please list your personal group's total expenditures in the communities in **surrounding area** outside the park (within 50 miles of any entrance point).

NOTE: Surrounding area residents should only include expenditures that were just for this trip to **[SPECIFY PARK NAME]**

Expenditures	a) Inside <i>[SPECIFY PARK NAME]</i>	b) In the communities within 50 miles
Spent no money (•)	<input type="radio"/> → Go to (b)	<input type="radio"/> → Go to (d)
Lodge, motel, rented condo/home, cabin, etc.		\$ _____
Camping fees and charges (including backcountry)	\$ _____	\$ _____
Water rafting/kayaking/canoeing guide fees and charges	\$ _____	\$ _____
Other guide fees and charges	\$ _____	\$ _____
Restaurants and bars	n/a	\$ _____
Groceries and takeout food	n/a	\$ _____
Gas and oil (auto, RV, boat, etc.)	n/a	\$ _____
Other transportation expenses (rental cars, auto repairs, taxis, but NOT airfare)	n/a	\$ _____
Admission, recreation, entertainment fees	n/a	\$ _____
All other expenditures (souvenirs, books, sporting goods, donations, etc.)	\$ _____	\$ _____

TOPIC AREA 7 – ECON5

c) How many people do the above expenses cover?

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

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

TOPIC AREA 3 - TRIPC23

21. Please mark (•) all the communities in *[SPECIFY PARK NAME]* area in which your personal group obtained support services on this visit.

Did not use any services in listed communities → Go to Question 22

Service	Community	Community
Buy gasoline	<input type="radio"/>	<input type="radio"/>
Buy groceries	<input type="radio"/>	<input type="radio"/>
Buy photography/art supplies	<input type="radio"/>	<input type="radio"/>
Buy recreational equipment/supplies	<input type="radio"/>	<input type="radio"/>
Eat a meal	<input type="radio"/>	<input type="radio"/>

Guide services (hunting, fishing, etc.)	<input type="radio"/>	<input type="radio"/>
Obtain travel/ tourist information	<input type="radio"/>	<input type="radio"/>
Shop	<input type="radio"/>	<input type="radio"/>
Stay overnight in a campground/RV park	<input type="radio"/>	<input type="radio"/>
Stay overnight in a motel/hotel/B&B/etc.	<input type="radio"/>	<input type="radio"/>
Use sport facilities (golf course, archery range, etc.)	<input type="radio"/>	<input type="radio"/>
Visit art gallery/ museums	<input type="radio"/>	<input type="radio"/>
Other (Please specify below)	<input type="radio"/>	<input type="radio"/>

TOPIC AREA 3 – TRIPC21

22. a) On this visit to [SPECIFY PARK NAME], were there any support services or products that your personal group needed but were not available inside the park or in the area (within 50 miles of any entrance point)?

- Yes
 No → **Go to Question 23**

TOPIC AREA 3 – TRIPC22

b) If YES, what were the products/services that your group needed but were not available? Please be specific

Location	Service/product
_____	_____
_____	_____
_____	_____

TOPIC AREA 3 – FVIS5

23. If you were to visit [SPECIFY PARK NAME] in the future, how would your personal group prefer to learn about cultural and natural history/features of the park? Please mark (•) all that apply.

- Not interested in learning about the park → **Go to Question 24**
- | | |
|--|--|
| <input type="radio"/> Indoor exhibits | <input type="radio"/> Outdoor exhibits |
| <input type="radio"/> Park website: www.nps.gov/ | <input type="radio"/> Cell phone tour |
| <input type="radio"/> Volunteer opportunities | <input type="radio"/> Smart phone apps |
| <input type="radio"/> Interactive computer programs | <input type="radio"/> Special events |
| <input type="radio"/> Other electronic medias (downloadable digital files, podcasts, Facebook, etc.) | |
| <input type="radio"/> Audiovisual programs (DVD, video, or audio) | |
| <input type="radio"/> Hands-on activities with touchable subjects/artifacts | |
| <input type="radio"/> Living history demonstrations/costumed interpretive programs | |
| <input type="radio"/> Self-guided with printed materials (brochures, books, maps, etc.) | |
| <input type="radio"/> Other (Please specify) _____ | |

TOPIC AREA 1 – RACE/ETH3

b) 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"/>

TOPIC AREA 1 – AGE1

27. For your personal group on this visit, please provide the following. (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) What year was your first visit to the [SPECIFY PARK NAME]	d) Number of times visited the [SPECIFY PARK NAME] up to date (including this visit)
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

TOPIC AREA 1 – GEND1

28. For you only, what is your gender?

- Male Female

TOPIC AREA 1 – LANG1

29. a & b) When visiting an area such as [**SPECIFY PARK NAME**], which languages do you and most members of your personal group prefer to use for the following?

a) Speaking English Other (Specify) _____

b) Reading English Other (Specify) _____

c) In your opinion, what **services** in the park need to be provided in languages other than English? Please specify a service(s) or mark (•) "None."

Service(s) _____ None

TOPIC AREA 1 - ED1

30. For you only, what is the highest level of education you have completed? Please mark (•) one.

Some high school Bachelor's degree

High school diploma/GED Graduate degree

Some college

TOPIC AREA 7 – ECON1

31. a) Which category best represents your annual **household** income? Please mark (•) **one**.

Less than \$24,999 \$50,000-\$74,999 \$150,000-\$199,999

\$25,000-\$34,999 \$75,000-\$99,999 \$200,000 or more

\$35,000-\$49,999 \$100,000-\$149,999 Do not wish to answer

b) How many people are in your household? _____ Number of people

TOPIC AREA 7 – ECON2

c) How much income did your household forgo to make this trip (due to taking unpaid time off from work)? Mark (•) "None" or specify the amount forgone.

None OR Amount forgone \$

TOPIC AREA 6 – EVALSERV3

32. a) What did your personal group like most about your visit to [**SPECIFY PARK NAME**]?

TOPIC AREA 6 – EVALSERV2

b) What did your personal group like least about your visit to [**SPECIFY PARK NAME**]?


TOPIC AREA 6 – OPMGMT1

33. If you were a manager planning for the future of [*SPECIFY PARK NAME*] what would your personal group propose?

TOPIC AREA 6 – OPMGMT3

34. Is there anything else your personal group would like to tell us about your visit to [*SPECIFY PARK NAME*]?

Thank you for your help! Please seal the questionnaire in the postage-paid envelope provided and drop it in any U.S. Postal mailbox.

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OFFICIAL BUSINESS

**Visitor Services Project
Park Studies Unit
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The questions in this section are specific only to the recreation areas listed.

Addendum 1: Questions Specific to National Recreational River (MNRR)

The current management issue at Missouri National Recreational River (MNRR) involves the fragmentation of interpretive exhibits and activities. Management of the nearly 100 miles of the Missouri river includes areas that are managed by different state, local, and federal agencies. While the collaborative management provides many positive aspects it also creates potential problem, primarily an identity issue. The MNRR asked to have questions that would specifically address the level of awareness their visitors have about the identity of the MNRR as a unit of the National Park Service. Other questions are specifically asked about interpretive exhibits system and the need for variety of activities for day use and more frequent visitors.

TOPIC AREA 1 - KNOW1

1. a) Prior to receiving this questionnaire, were you and your personal group aware that Missouri River National Recreational River existed?

Yes No → **Go to Question 2**

TOPIC AREA 1 – KNOW9 (Variation)

c) Prior to receiving this questionnaire, were you and your personal group aware that Missouri National Recreational River is a part of National Wild & Scenic Rivers Systems?

Yes No

TOPIC AREA 3 – ACT1

2. a) Were you aware that the National Park Service offers a variety of extended programs at Missouri National Recreational River that may require more than a one-time commitment?

Yes No

b) Please mark (•) **all** programs in which you would be interested in participating.

- Not interested in extended programs
- Volunteer activities
- Workshops/seminars/Park Institute programs
- Community programs
- Citizen science programs (learning how to use observation skills/ equipment and helping do park science, such as helping with bird/ butterfly/wildlife counts, counting native/non-native plants, etc.)
- Other (Please specify) _____

TOPIC AREA 3 – ACT4

7. a) Were there any activities that you and your personal group wanted to do but were unable to do while visiting Missouri National Recreational River?

Yes No → **Go on to Question 8**

b) If YES, what were they? Please be specific.

TOPIC AREA 3 – ACT7 (Variation)

c) What prevented you from participating in these activities? Please mark (•) all that apply.

- Time constraints Financial constraints
- River conditions Weather conditions
- Were not aware what activities were offered at the park
- Facilities for the activities were not available
- Services for the activities were not available
- Other reasons (Please specify) _____

TOPIC AREA 6 – EVALSERV13 (Variation)

8. A series of outdoor exhibits were installed at boat ramps, along walking trails, and at overlooks along the Missouri National Recreational River. There are also indoor exhibits in the Lewis and Clark Visitor Center at Gavins Point Dam, in the Chamber of Commerce/Welcome Center in Yankton, and in the Missouri National Recreational River Education Center at Ponca State Park.

a) On this visit to Missouri National Recreational River please list all the exhibits that you and your personal group viewed/read. Please use the map on the next page to help you locate the site. **For outside signs, please only include those with the park's name and/or a National Park Service Arrowhead at the top.**

Did not view/read any exhibits → **Go to Question 9**

b) Please rate the quality of the exhibits that you and your personal group viewed/read. Please mark (•) **one** for each exhibit viewed/read.

a) Exhibit location/topic	b) Quality				
	Very poor	Poor	Average	Good	Very good
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TOPIC AREA 6 – EVALSERV16

- c) How could the exhibits and displays be improved to enhance your experience? For each exhibit you viewed, please specify its location/topic, and your recommendations.

Exhibit location/topic

Recommendations for improvement

- d) Please suggest topics to add or delete, or specific types of exhibits or displays that you would find interesting.

Exhibit/display/topic

Recommendations for improvement

Addendum 2: Questions Specific to Chickasaw National Recreation Area (CHIC)

Working with local communities and support economic development in the area is one of the important management goals at CHIC. The following questions aimed to measure visitor needs of commercial services in the area. The expenditure question in the above section measures the economic impact of the park on the local area (estimated by Money Generation Model) which were included in 2005 survey at CHIC. In addition to local economic impact analysis, questions 17 below added to this year's survey to extend the economic impact to consumer surplus estimated by the travel cost model could help the local businesses to focus their marketing effort. As number of visitors using recreational vehicles increases Question 10 will be used to collect information needed for transportation management and planning.

TOPIC AREA 3 – FVIS16

17. If you were to visit Chickasaw NRA in the future, which commercial services would your personal group like to have available? Please mark (•) all that apply.

- | | |
|--|--|
| <input type="radio"/> Bait/tackle shop | <input type="radio"/> Camper store |
| <input type="radio"/> Bike rentals | <input type="radio"/> Horseback riding |
| <input type="radio"/> Boat tours | <input type="radio"/> Motorboat rental |
| <input type="radio"/> Cabin or lodge | <input type="radio"/> Sit-down restaurant |
| <input type="radio"/> Small boat rental (canoe/kayak) | <input type="radio"/> Takeout food service |
| <input type="radio"/> Marina services (gas, oil, boating supplies) | |
| <input type="radio"/> Other (Please specify) | |

TOPIC AREA 3 – TRANS14

10. a) On this visit, did your personal group drive a recreational vehicle to Chickasaw NRA?

- Yes No → **Go to part c of this question**

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

c) On this visit, did anyone in your personal group use a vehicle or recreational vehicle to pull a trailer or another vehicle?

- Yes No → **Go to Question 11**

d) If YES, how long was the trailer or other vehicle? _____ Number of feet

Addendum 3: Questions Specific to Mount Rainier National Park (MORA)

MORA is in the process of developing Visitor Experience and Resource Protection (VERP) indicators. Information about visitor experience and opinion on resource project is crucial to develop such indicators. The following questions are specific to MORA as they aim to obtain visitor opinions on various resource management issues such as wildlife-human interface (question 2), campfire (question 6), alternative transportations (questions 9 and 10), and wilderness experience (question 15). Question 25 was designed to measure level of visitor awareness about various resource management issues and effectiveness of interpretive efforts at the park. Appropriate communication methods and interpretive programs will be designed as the results of the information collected.

TOPIC AREA 3 – ACT26

2. Wildlife feeding creates hazards to visitors and habituation problems for wildlife.
- a) During this visit, did your personal group observe wildlife approaching you or other visitors and begging for food?
- Yes No Not sure

TOPIC AREA 2 - TPLAN19 (*Variation*)

- b) During this visit, did your personal group receive or see any information (written or verbal) regarding feeding wildlife in national parks?
- Yes No Not sure

TOPIC AREA 6 – OPMGMT6

6. Due to possible health concerns associated with campfire smoke, would your personal group support limiting the number of campfires permitted at one time within park campgrounds?
- Yes No Not sure

TOPIC AREA 1 KNOW9

9. a) Prior to this visit, was your personal group aware that Mount Rainier has a shuttle bus service that operates during summer weekends between Ashford, WA and Paradise?
- Yes No

TOPIC AREA 3 – TRANS9

- b) Has your personal group ridden the Mount Rainier shuttle bus before today's visit?
- Yes No

TOPIC AREA 3 – TRANS4

c) Did your personal group use the Mount Rainier shuttle bus system today?

- No Yes → Go to Question 10

d) If NO, which reasons best explain why your personal group did not use the Mount Rainier shuttle bus system today? Please mark (•) all that apply.

- Not convenient Difficult to understand how to use it
 With children Shuttle did not stop at places I wanted to go
 Other (Please specify)

TOPIC AREA 6 – EVALFEE1 (Variation)

e) Would your personal group be willing to support a \$5 increase in entrance fees to support shuttle services?

- Yes No Not sure

TOPIC AREA 2 – TRIP PLANNING

10. If you knew before entering the park that the parking lots were completely full at Paradise, which of the following would your personal group do? Please mark (•) one.

- Drive to Paradise anyway to try to find a parking space
 Park in Ashford and ride the free shuttle to Paradise
 Park somewhere else inside the park and ride the free shuttle to Paradise
 Go to another location in the park where parking is available (which one?)
 Carbon Longmire
 Sunrise Westside Road
 Stevens Canyon Entrance (SE corner)
 Other (Please specify)
 Avoid Mount Rainer NP and go somewhere else (Please specify below)

TOPIC AREA 6 – EVALFEE1 (Variation)

15 Entrance and user fees support many park projects including Wilderness protection.

a) Would an additional fee charged for a Wilderness permit prevent your personal group from participating in the following activities?

- Day hiking Yes No Not sure
Overnight camping Yes No Not sure

TOPIC AREA 6 – EVALFEE1 (Variation)
--

b) Would your personal group be willing to support increased entrance fees of \$XX [Insert dollar amount for this site] to offset decreases in park operating budgets?

Yes No Not sure

TOPIC AREA 1 – KNOW9

25. Increasing public awareness is our best tool to ensure that visitors and resources are protected. Please rate from 1-3 your awareness level, both before and after your visit to Mount Rainier NP.

a) Awareness BEFORE visit to park? 1=Not aware 2=Somewhat aware 3=Very aware	Element	b) Awareness AFTER visit to park? 1=Not aware 2=Somewhat aware 3=Very aware
_____	Mount Rainier Wilderness	_____
_____	Wildlife feeding and habituation	_____
_____	Hiking off trails in Paradise, Sunrise, Tipsoo and Reflection Lakes	_____
_____	Leave No Trace program and principles	_____
_____	Air pollution effects on park ecosystems	_____
_____	Airborne pollutants	_____
_____	Climate change effects on park ecosystems and park developments	_____
_____	Introduction of exotic plants	_____
_____	Introduction of invasive aquatic species	_____
_____	Introduction/spread of diseases to park animals	_____
_____	Wildlife hazards to visitors	_____
_____	Geohazard issues	_____

Addendum 4: Questions Specific to Lincoln Boyhood National Memorial

The opening of U.S 231 has changed the traffic route that visitors take to access Lincoln Boyhood National Memorial. Although this is a fee area, at some access points visitors may not be aware of the fee charged and thus do not pay the entrance fee required. The park is considering a plan to reconfigure access points to the park and data is needed for this effort. In addition, if visitors access the park at remote points, they may encounter roving park staff/ranger. Question 11 was added to evaluate quality of services provided by park staff at those locations, which is not currently measured.

TOPIC AREA 7 – ECON7 (Variation)

18. On this visit to Lincoln Boyhood NMEM how did your personal group pay the entrance fee? Please mark (•) one.
- Were not aware that entrance fee is required
 - Were aware that entrance fee is required but we didn't go inside the visitor center
 - Were aware that entrance fee is required, but believed the fee was included in the Lincoln State Park fee
 - Cash/check
 - Interagency Pass/Senior Pass/Access

TOPIC AREA 3 – ACT28

11. a) During this visit to Lincoln Boyhood NMEM, did your personal group have any personal interaction with a park ranger other than on the tour?
- Yes No → Go to Question 12

TOPIC AREA 6 – EVALSERV10

- b) If YES, on a scale from 1 to 5, please rate the quality of your interaction with the park ranger. Please mark (•) one response for each item.

	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"/>

Addendum 5 Questions Specific to Jefferson National Expansion Memorial

JEFF works closely with partners from the local government agencies and businesses in their marketing and business planning. Located in downtown St. Louis, MO, any changes in the park operation will have an effect on local transportation and thus affect businesses in the surrounding area. The following questions were added to JEFF survey to address effects of park operations on local businesses. Question 6 provides information for marketing efforts. Question 7, 16 and 17 provide information for transportation and business planning. Question 13 aims to measure visitor willingness to pay. The information is unique to JEFF situation and will be shared with partners to amend their business plans.

TOPIC AREA 2 – TPLAN12

6. When did your personal group make the decision to visit Jefferson National Expansion Memorial? Please mark (•) one.
- On the day of the visit
 - The day before the visit
 - 3 days to a week before the visit
 - More than a week to a month before the visit
 - More than a month to 6 months before the visit
 - More than 6 months but less than a year before the visit
 - A year or more before the visit

TOPIC AREA 3 – TRANS2

7. a) On this visit, how many vehicles did your personal group use to arrive at the memorial parking?
- Number of vehicles
- OR
- Walked/bicycled/used public transportation
 - Parked somewhere else

TOPIC AREA 5 – CROWD7 (Variation)

- b) If you parked at the memorial parking, did your personal group find the parking location convenient?
- Yes No

TOPIC AREA 6 – EVALSERV8 (Variation)

- c) If you parked at the memorial parking, did you feel safe parking there?
- Yes No

TOPIC AREA 6 – EVALFEE3

13. Currently, several concession fees are charged at Jefferson National Extension Memorial for different services including parking, tram ride in the arch and movies in the museum. Some fees include the \$3 entrance fee to the park and thus are discounted for pass holders and combined tickets. On this visit, please rate the fees paid to each of the concession services below.

Service	Did not use	Too low	About right	Too high
Arch tram (\$10/adult and \$2.5/child)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lewis and Clark movie (\$4/adult and \$2.5/child)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monument to the Dream movie (\$4/adult)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parking fee	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

TOPIC AREA 3 – FVIS1

16. a) If the park were expanded to the Illinois side of the river, and it was convenient to access, would your personal group visit this new addition to the park?

Yes, likely No, unlikely Not sure

TOPIC AREA 3 – TRANS1

- b) How would you prefer to travel to the site? Please mark (•) one.

Own vehicle (car, tour bus, motorcycle, etc.)
 Public transportation
 Bicycle
 Walk
 Other (Please specify)

TOPIC AREA 7 – ACT1

17. Which types of activities and programs would your personal group be interested in participating along the riverfront on a future visit? Please mark (•) all that apply.

Bicycle rentals Riverboat cruise
 Dining Small musical concerts
 Interpretive programs Watching the river
 Other (Please specify)

Addendum 6: Questions Specific to White Sands National Monument

White Sands National Monument is located in an area with limited access to travel amenities. The nearest town is 15 miles northeast of the park. It causes inconvenience and interrupts the visit experience for visitors to have to travel outside the park to obtain necessities especially during a day trip. The park gift shop currently provides limited items. The question below is added to determine if the current items at the park gift shop meet visitor needs and plan for future expansion if needed.

TOPIC AREA 6 – EVALSERV13

11. a) The park gift store currently sells a wide variety of convenient food items. On this visit, did your personal group buy any food items from the gift store?

Yes No

- b) Please rate the quality of any food items that your personal group bought in the park gift store. Please mark (•) **one**.

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

TOPIC AREA 3 – FVIS19

- c) If your personal group were to visit White Sands National Monument in the future, would you prefer to have more picnic items available such as fresh sandwiches, chips, sodas, etc.?

Yes No Not sure