**NOTE FOR 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 that those questions will require further review and consideration by OMB before full determination and approval can be granted.*

**Crystal River Visitor Study**

*Dear Visitor, Thank you for taking the time to complete this survey. It should only take about 10 minutes to answer the questions and return the complete survey to the on-site personnel. This very short survey will be used to help the Managers of Sleeping Bear National Lakeshore to understand more about the visitors like you who are visiting the Crystal River. Thank you for your help.*

**TOPIC AREA 1: VISITHIS2**

1. Including this trip, how many times have you visited \_\_\_\_\_\_\_ # of visits

 the **Crystal River?**

**TOPIC AREA 3**: **TRIPC1**

2. How many miles did you travel from your residential home to visit the

 **Crystal River** this year?

 \_\_\_\_\_\_\_ miles

**TOPIC AREA 1: GR3**

3. Including yourself, how many people were in your group? \_\_\_\_\_\_ # of people

**TOPIC AREA 3**: **TRANS1**

4. How did you travel on the Crystal River during this visit? (Check all that apply, but if more than one, underline the way you traveled most.)

 PADDLED A PRIVATELY OWNED CANOE/KAYAK

 PADDLED A RENTED CANOE/KAYAK

 FLOATED ON PRIVATELY OWNED TUBE

 FLOATED ON RENTED TUBE

 OTHER (Describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOPIC AREA 3: TRIPC15**

5. At what entry point/location did your trip begin? (Check one)

 Fisher Road Boat Launch Co Rd 675 River Portage

**TOPIC AREA 1: KNOW2**

6. Prior to your visit, were you aware that part of the **Crystal River** is

 managed by the National Park Service? (Circle one) 1. Yes 2. No

**TOPIC AREA 1: GEND1**

7. Are you: (Circle one) 1. Female 2. Male

**TOPIC AREA 1- AGE3**

8. What is your age? \_\_\_\_\_ Years

**TOPIC AREA 1- ED2 (*Variation)***

9. What is the highest level of education in years you have attained? (Circle one number that best represents your education)

|  |  |  |  |
| --- | --- | --- | --- |
| 8 9 10 11 | 12 | 13 14 15 16 | 17 18 19 20 21 |
| Less than a high school diploma | High school graduate or GED | Undergraduate college degree *(BS, BA, etc)* | Graduate degree*(MS, PhD, MD, JD, etc.)* |

**TOPIC AREA 4 – PA1**

10. The Crystal River may have many different roles in people’s lives. As you think about the Crystal River please indicate the extent to which you agree or disagree with each statement below. (Circle one number for each statement)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |

a. I am very attached to the Crystal River. 1 2 3 4 5

b. The Crystal River is the best place for what I like to do. 1 2 3 4 5

c. I get more satisfaction out of visiting the Crystal River 1 2 3 4 5

than any other.

d. The Crystal River is very special to me. 1 2 3 4 5

e. Doing what I do at the Crystal River is more 1 2 3 4 5

 important to me than doing it in any other place.

*The Crystal River is*

f. A place to escape from civilization. 1 2 3 4 5

g. The real “north woods.” 1 2 3 4 5

h. A place of high environmental quality. 1 2 3 4 5

i. A pristine natural area. 1 2 3 4 5

**TOPIC AREA 6: TRUST (*Variation)***

The National Park Service is responsible for managing recreation use on the Crystal River. Its mission is to conserve nature, wildlife, and historical objects while providing for their enjoyment for the public and future generations. As you think about your interaction with the National Park Service please indicate the extent to which you agree or disagree with each statement below. (Circle one number for each statement)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree | Don’tKnow |
|  |  |  |  |  |  |

aa. The National Park Service shares my values

about how the Crystal River should be managed. 1 2 3 4 5 X

ab. I share the National Park Service’s goals for

the Crystal River. 1 2 3 4 5 X

ac. The National Park Service supports my views

 about the Crystal River. 1 2 3 4 5 X

ad. I trust the National Park Service in their efforts

 to manage the Crystal River. 1 2 3 4 5 X

*The connection I have with the* National Park Service

ae… is something I really care about. 1 2 3 4 5 X

af… is something I intend to maintain indefinitely. 1 2 3 4 5 X

ag… deserves my maximum effort to maintain. 1 2 3 4 5 X

ah… is very important to me. 1 2 3 4 5 X

ai … is something I am very committed to. 1 2 3 4 5 X

aj … is very much like being family. 1 2 3 4 5 X

**TOPIC AREA 5: CROWD 1**

11. How crowded did you feel while on the Crystal River? (Circle one number)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Not at all Crowded |  | Somewhat Crowded |  | ModeratelyCrowded |  | Very Crowded |  | ExtremelyCrowded |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |

**TOPIC AREA 5: CROWD 15**

12. What is the total number of other groups you saw while

on the Crystal River? \_\_\_\_\_\_ # of Groups

**TOPIC AREA 5: CROWD 20**

13. What is the total number of other groups you would prefer to see

during your trip on the Crystal River? \_\_\_\_\_\_ # of Groups

**TOPIC AREA 5: CROWD20 (*Variation)***

14. What is the maximum number of other groups you could see during

your trip before you no longer would use the Crystal River? \_\_\_\_\_\_ # of Groups

**TOPIC AREA 5: CROWDATT12 (*Variation)***

15. How did the following compare with what you expected to see on the Crystal River?

(Circle one scale response for each statement)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Far****Fewer** | **Fewer** | **About what I Expected** | **More than I Expected** | **Far More than I Expected** | **Had not Preference** |
| 1. the number of groups you saw on the river
 | FF | F | P | M | FM | X |
| 1. the number of groups you saw at the put-in
 | FF | F | P | M | FM | X |
| 1. the number of groups you saw at the take out
 | FF | F | P | M | FM | X |

**TOPIC AREA 5: CROWDATT12 (*Variation)***

16. How did the following compare with what you preferred to see on the Crystal River?

(Circle one scale response for each statement)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Far****Fewer** | **Fewer** | **About what I Preferred** | **More than I Preferred** | **Far More than** **I Preferred** | **Had not Preference** |
| 1. the number of groups you saw on the river
 | FF | F | P | M | FM | X |
| 1. the number of groups you saw at the put-in
 | FF | F | P | M | FM | X |
| 1. the number of groups you saw at the take out
 | FF | F | P | M | FM | X |

**TOPIC AREA 5: VERP1 (*Variation*)**

17. We would like to know how many other groups you think are acceptable to see without the

Crystal River being too crowded. Please rate the acceptability of each of the following numbers of other groups seen on your trip.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Very Unacceptable | Unacceptable | Slightly Unacceptable | Neutral | Slightly Acceptable | Acceptable | Very Acceptable |

See no other groups -3 -2 -1 0 +1 +2 +3

See up to 5 other groups -3 -2 -1 0 +1 +2 +3

See up to 10 other groups -3 -2 -1 0 +1 +2 +3

See up to 15 other groups -3 -2 -1 0 +1 +2 +3

See up to 20 other groups -3 -2 -1 0 +1 +2 +3

See up to 30 other groups -3 -2 -1 0 +1 +2 +3

See up to 40 other groups -3 -2 -1 0 +1 +2 +3

See up to 50 other groups -3 -2 -1 0 +1 +2 +3

**TOPIC AREA 6**: **OPMGMT6**

18. We are interested in the type of management you think is appropriate on the Crystal River.

Please indicate the degree to which you support or oppose the following management actions that are sometimes used in a river setting (Circle one number for each item).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly** **Oppose** | **Oppose** | **Neither support or oppose** | **Support** | **Strongly Support** |
| Prohibit the use of glass containers | 1 | 2 | 3 | 4 | 5 |
| Prohibit the use of alcohol | 1 | 2 | 3 | 4 | 5 |
| Limiting in the number of usersfollowing public consultation | 1 | 2 | 3 | 4 | 5 |

**TOPIC AREA 6: EVALSERV17 (*Variation)***

19. How satisfied are you with the current management of the Crystal River?

 (Circle one number)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Not at all satisfied |  | Somewhat satisfied |  | ModeratelySatisfied |  | Very Satisfied |  | ExtremelySatisfied |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |

**TOPIC AREA 3: FVIS1 (*Variation)***

20. Do you plan to return to the Crystal River in the future? 1. Yes 2. No

**TOPIC AREA 6: OPMGMT7**

21. These items represent conditions you may have encountered on the Crystal River. Please indicate two things for each item. First, whether you felt the item was a problem during the visit. Second, whether you feel the situation has become better or worse over the years you have been coming to the Crystal River. If this was your first trip, or if you really don’t know the trend, circle the X for ‘Don’t Know.’

 **First, is it:** ║  **Second, is it:**

 Not a A ║ Getting Getting Don’t

 Problem Problem ║ Better Worse Know

 ║

a. Bank Erosion N Y ║ + – X

 ║

 ║

b. Noisy/Loud Groups N Y ║ + – X

 ║

 ║

c. Social trails N Y ║ + – X

 ║

 ║

d. Vegetation Damage N Y ║ + – X

 ║

 ║

e. Inappropriate Language N Y ║ + – X

 ║

 ║

f. Litter N Y ║ + – X

 ║

 ║

g. Improper disposal ║

 of human waste N Y ║ + – X

 ║

 ║

h. Large groups of people N Y ║ + – X

 ║

 ║

i. Conflicts between users N Y ║ + – X

**TOPIC AREA 4: PREF1**

22. Below is a list of possible experiences you may have sought while visiting the **Crystal River** Please indicate how important the experience is to you on your visit to the **Crystal River**

(1 being not important, and 5 being extremely important):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Not at all Important | SlightlyImportant | ModeratelyImportant | Very Important | Extremely Important |

 **Experience:**

To be away from the everyday routine of home 1 2 3 4 5

To be in a natural setting 1 2 3 4 5

To share quality time with family/friends 1 2 3 4 5

To develop my knowledge of the area 1 2 3 4 5

To be with people who have similar interests 1 2 3 4 5

To get away from crowded areas 1 2 3 4 5

To enjoy the natural scenery 1 2 3 4 5

To do something with my family/friends 1 2 3 4 5

To learn more about nature 1 2 3 4 5

To talk to new and varied people 1 2 3 4 5

To experience the solitude/privacy 1 2 3 4 5

To enjoy the tranquility of the area 1 2 3 4 5

To bring family/friends closer together 1 2 3 4 5

To learn about the natural history of the area 1 2 3 4 5

To meet new people 1 2 3 4 5

To party with friends and family 1 2 3 4 5

**TOPIC AREA 4: PREF (*Variation)***

23. From the list above, please tell us which of the experiences you valued the most during your visit on the Crystal River?

**PLEASE USE THE REMAINING SPACE TO MAKE ANY FURTHER COMMENTS**

**PRIVACY ACT and PAPERWORK REDUCTION ACT statement:** The National Park Service is authorized by16 U.S.C. 1a-7 to collect this information. This information will be used by Sleeping Bear National Park managers to understand visitor experiences and attitudes about current management at the Crystal River. Response to this request is voluntary. No action may be taken against you refusing to supply the information requested. Please do not put your name or that of any member of your group on the questionnaire. All permanent data associated with this collection 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 and expiration date.

**BURDEN ESTIMATE** **statement:** Public reporting burden for this collection of information is estimated to average 10 minutes per response. Please send any comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the NPS Information Collection Review Coordinator, National Park Service, 1201 Oakridge Dr., Fort Collins, CO 80525.

OMB Control Number 1024-0224

Current Expiration Date 8/31/2014