



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

**Visitor Services Project**

# **2013 Visitor Study**

Insert photo

**United States Department of the Interior**

NATIONAL PARK SERVICE  
[SPECIFY PARK NAME]  
Address



Date, 2013

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, 208-885-2585 (phone), 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 Paperwork Reduction Act requires us to tell you why we are collecting this information, how we will use it, and whether or not you have to respond. This information will be used by the National Park Service as authorized by 16 U.S.C. 1a-7. We will use this information to evaluate visitor services and facilities managed by [**SPECIFY PARK NAME**]. Your responses are voluntary and anonymous. Your name and address have been requested for follow-up purposes only. At the completion of this collection all names and personal information will be destroyed and in no way be connected with the results of this survey. A Federal agency may not conduct or sponsor and you are not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. We estimate that it will take an average of 20 minutes to complete the survey associated with this collection of information. You may send comments concerning the burden estimates or any aspect of this information collection 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](mailto:lenale@uidaho.edu) (email).

## 2013 Visitor Survey

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 match 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.

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).

a) This visit	b) Future visit	Source of information
<input type="radio"/>	<input type="radio"/>	Friends/relatives/word of mouth
<input type="radio"/>	<input type="radio"/>	Inquiry to park via phone, mail, or email
<input type="radio"/>	<input type="radio"/>	[SPECIFY PARK NAME] website: www.nps.gov/
<input type="radio"/>	<input type="radio"/>	Other websites — Which one(s)? _____
<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.)

- n/a      Other, this visit (Specify) \_\_\_\_\_
- n/a      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 3 - TRIPC1**

2. a) Was every member in your personal group a resident of the **[SPECIFY PARK NAME]** area (within time/distance)?
- No                       Yes

**Topic Area 3 - TRIPC1**

- b) For nonresident members of your personal group, what was the primary reason for the person to come to the area? Please mark (●) only **one**.
- Visit **[SPECIFY PARK NAME]**
  - Visit friends/relatives in the area
  - Unplanned stop on the way to somewhere else
  - Business
  - Other reason (Please specify) \_\_\_\_\_

**Topic Area 3 - TRANS1**

- c) For non-residents, what was the method of transportation that your personal group used to travel most of the distance from their home to the **area** (within time/distance)? Please mark (●) only **one**.
- Car                       Motorcycle                       SUV/truck/van
  - Motorhome               Airplane
  - Other (Please specify) \_\_\_\_\_

**Topic Area 3 - TRIPC2 Variation**



**TOPIC AREA 3 - TRIPC18**

6. On this visit to **[SPECIFY PARK NAME]**, which other places did you and your personal group visit in the area Please mark (●) all that apply.
- [area-specific list of nearby attractions/places]
  - Other (Please specify)

**TOPIC AREA 3 - TRIPC8**

7. On this visit, how much **total** time 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 3 - ACT1**

8. 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 this park in the future, 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.)

O            n/a            Other - this visit (Specify below)

\_\_\_\_\_

n/a            O            Other - future visit (Specify below)

\_\_\_\_\_

c) Which one of the above activities was the primary reason your personal group visited [**SPECIFY PARK NAME**] on this visit? Please list one response.

\_\_\_\_\_

Topic Area 3 - ACT4

9. a) On this visit to visited [**SPECIFY PARK NAME**], was there anything specific that your personal group wanted to see or do, but were not able to?

\_\_\_\_\_ Yes

\_\_\_\_\_ No  Go on to Question xx

Topic Area 3 - ACT5

b) If so, what were you unable to see or do? \_\_\_\_\_

Topic Area 3 - ACT6

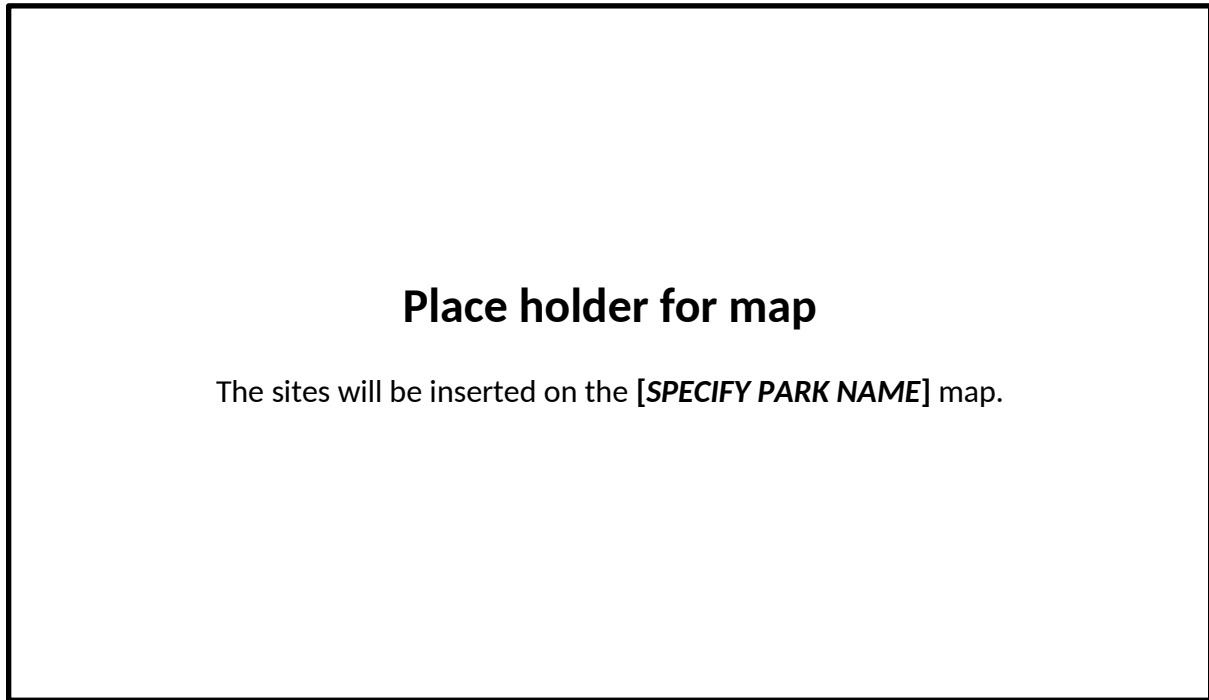
c) What prevented your personal group from being able to see or do what you wanted?

\_\_\_\_\_



**TOPIC AREA 3 - ITIN1**

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



**TOPIC AREA 6 - EVALSERV13**

11. 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
○ Assistance from park staff	_____	_____
○ Bookstore sales items (selection, price, etc.)	_____	_____
○ Campground	_____	_____
○ Junior Ranger program	_____	_____

- |                       |   |       |       |
|-----------------------|---|-------|-------|
| <input type="radio"/> | Park brochure/map   | _____ | _____ |
| <input type="radio"/> | Park newspaper  | _____ | _____ |
| <input type="radio"/> | Park website: www.nps.gov/<br>used before or during visit | _____ | _____ |
| <input type="radio"/> | Ranger-led programs                                       | _____ | _____ |
| <input type="radio"/> | Restrooms   | _____ | _____ |
| <input type="radio"/> | Trails  | _____ | _____ |
| <input type="radio"/> | Visitor center exhibits                                   | _____ | _____ |
| <input type="radio"/> | Visitor center (overall)                                  | _____ | _____ |

<b>TOPIC AREA 6 - EVALSERV1</b>
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12. 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
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

<b>TOPIC AREA 7 - ECON4</b>
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13. 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).

<b>NOTE: Surrounding area residents should only include expenditures that were just for this trip to [<b>SPECIFY PARK NAME</b>]</b>
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<b>Expenditures</b>	a) Inside [ <b>SPECIFY PARK NAME</b> ]	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 - TRIPC1**

14. On this visit, what were the reasons your personal group visited [*SPECIFY PARK NAME*]? Please mark (•) all that apply.

- Visit a National Park Service site
- Show park to friends/relatives
- Obtain stamp in National Park Service passport
- Specific activity
- Specific activity
- Other (Please specify)
- Learn history
- Saw sign on highway

**Topic Area 6 - EVALSERV4**

15. 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                       Yes  No     Did not use
- b) State highway signs                       Yes  No     Did not use
- c) Signs in local communities                       Yes  No     Did not use
- d) Signs in the park                       Yes  No     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 6 - OPMGMT4**

16. 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.

<b>Resource/attribute</b>	<b>Not at all important</b>	<b>Slightly important</b>	<b>Moderately important</b>	<b>Very important</b>	<b>Extremely important</b>
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 - FVIS16**

17. 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**

18. 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**

19. 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 - FVIS12**

20. If you were to visit **[SPECIFY PARK NAME]** in the future, what would encourage you and your personal group to attend a ranger-led activity/ program? Please mark (●) **all** that apply.
- Nothing
  - Programs scheduled more often
  - Greater variety of program topics
  - Greater variety of types of activities
  - Other reasons (Please specify) \_\_\_\_\_

**TOPIC AREA 3 - FVIS7**

21. 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 xx**

**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 – EVALSERV8**

22. a) For the safety issues below, please indicate how safe your personal group felt from crime and accidents during this visit to **[SPECIFYPARK NAME]**. Please mark (•) **one** answer for each issue.

How safe did you feel in the park?

Safety issue	Very unsafe	Neither safe nor unsafe		Safe	Very safe
	Personal safety—from crime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal safety—from accidents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal property—from crime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Topic Area 6 – EVALSERV9**

b) If you marked that you felt “very unsafe” or “unsafe” for any of the above issues, please explain why.

\_\_\_\_\_

\_\_\_\_\_

**TOPIC AREA 6 - OPNMGMT2**

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Topic Area 3 - TRIPC20**

24. a) In which communities did your personal group obtain support services (e.g. gas, food, lodging, information) for this visit to [SPECIFY PARK NAME]? Please mark (.) all that apply.

- None → Go to Question xx
- Community                       Community                       Community
- Other (Please specify) \_\_\_\_\_

b) Were you and your personal group able to obtain all of the services that you needed in these communities?

- Yes                                       No

c) If NO, what needed services were not available?

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

**TOPIC AREA 3 - FVIS5**

25. 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 xx
- Indoor exhibits                                       Outdoor exhibits
- Park website: www.nps.gov/                                       Cell phone tour
- Volunteer opportunities                                       Smart phone apps
- Interactive computer programs                                       Special events
- Other electronic medias (downloadable digital files, podcasts, Facebook, etc.)
- Audiovisual programs (DVD, video, or audio)
- Hands-on activities with touchable subjects/artifacts

- Living history demonstrations/costumed interpretive programs
- Self-guided with printed materials (brochures, books, maps, etc.)
- Other (Please specify) \_\_\_\_\_

c) Which one of the above activities was the primary reason your personal group visited Pinnacles NM on this visit? Please list one response.

\_\_\_\_\_

**Topic Area 3 – FVIS4**

26. If you were to visit [**SPECIFY PARK NAME**] in the future, which subjects would your personal group like to learn about? Please mark (●) all that apply.

- Not interested in learning about these subjects → Go to Question 26
- Park-specific list of subjects
- Other (Please specify)

**Topic Area 3 – FVIS1 Variation**

27. a) 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**
- Vacationed at home
- Gone to work at your regular job
- Not sure
- Other (Please specify) \_\_\_\_\_

**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 **OR** Location \_\_\_\_\_  
(Place, city & state)

**Topic Area 6 – CROWD1**

28. Please indicate how crowded you felt at each of the following locations in [**SPECIFY PARK NAME**]?





**Topic Area 1 – GR4**

31. a) Does anyone in your personal group have a physical condition that made it difficult to access or participate in park activities or services?

- Yes                       No

b) If YES, what activities, services or facilities did the person(s) have difficulty participating in or accessing? Please be specific.

\_\_\_\_\_

\_\_\_\_\_

**Topic Area 1 – RACE/ETH1**

32. a) Are members of your personal group Hispanic or Latino? Please mark (  ) **one** for each group member.

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
Yes, Hispanic or Latino	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No, not Hispanic or Latino	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**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="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Black or African American	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian or other Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Topic Area 1 – AGE1**

33. 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	d) Number of times visited the [SPECIFY PARK NAME] up to date (including this
_____	_____	_____	_____

	[SPECIFY PARK NAME]			
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

**Topic Area 1 - LANG1**

34. a & b) When visiting an area such as Missouri National Recreational River, 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**

35. 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**

36. 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**

37. 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 – OPMGMT3**

38. 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.

 Printed on recycled paper

**OFFICIAL BUSINESS**

**Visitor Services Project  
Park Studies Unit  
College of Natural Resources  
University of Idaho  
P.O. Box 441139  
Moscow, Idaho 83844-1139**

## Addendum -

### Questions specific to Washita Battlefield National Historic Site

Washita Battlefield National Historic Site preserves the site of an attack by Lt. Col George A Custer on the Southern Cheyenne village of Peace Chief Black Kettle in 1868. The site was established in 1996, but has never had a visitor study. Realizing that park websites are getting increasing use, park managers are interested in assessing aspects of the Washita Battlefield National Historic Site website to see whether it needs improvement and if so, how.

#### Topic Area 2 - TPLAN6 (Variation)

- b) What were the types of information that you searched for on the park website? Please mark (.) all that apply.
- c) For the type of information that you obtained on the park website please rate the quality of information provided

b) Information type searched	c) Quality rating				
	Very poor	Poor	Average	Good	Very good
<input type="radio"/> Trip planning (location, direction, hour of operation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> History of the park	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Things to do at the park	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Things to do in the area	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Other (Please specify below)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

\_\_\_\_\_

#### Topic Area 2 - TPLAN8 (Variation)

- d) What should be improved or added to the park website to better assist you in making personal connection with the story presented at the park?

\_\_\_\_\_

\_\_\_\_\_

## Questions specific to Grant-Kohrs Ranch National Historic Site

Grant-Kohrs Ranch National Historic Site preserves the headquarters of a once-large 19<sup>th</sup> century cattle ranch that operated for more than 125 years. This now smaller operating ranch has never had a visitor study since it was established in 1972. Because visitors stop on their way between major national parks such as Yellowstone and Glacier, they are often unaware of what to expect to properly plan their visit. Question 1 provides valuable information about trip planning that would help in working with local communities on their marketing effort. Question 2 provides visitor's references in interpretive topics to plan for interpretive program that meet their needs.

### Topic Area 2 – TPLAN12

1. When did your personal group make the decision to visit Grant-Kohrs Ranch NHS? Please mark (●) one.
- On the day of or the day before the visit
  - 3-7 days before the visit
  - 8-30 days before the visit
  - 1-6 months before the visit
  - More than 6 months but less than a year before the visit
  - A year or more before the visit

### Topic Area 3 – FVIS4

2. Grant Kohrs Ranch NHS presents different stories via interpretive media including exhibits, museum, electronic media, ranger programs, hands on activities and demonstrations.
- a. On this visit, please indicate if your personal group learned about the following topic through park interpretive media. Please mark Yes or No for each topic.

### Topic Area 3 – LEARN1

- b. For those topics that your personal group learned during this visit, how much did your level of understanding of the topics improve during your visit? Please mark (●) one answer for each topic.

a) Learned on this visit?		Topic	b) Level of understanding improvement			
Yes	No		Not at all	Slightly	Somewhat	Significantly
<input type="radio"/>	<input type="radio"/>	Park-specific topics [list]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Questions specific to Dinosaur National Monument

Dinosaur National Monument preserves a wall of dinosaur bones inside a building, which was re-opened in 2011 after 5 years of renovations. The closure and extreme decrease in visitation made park managers realize they need more information about the visitors to effectively attract them to the monument. No visitor studies have ever been done although the monument was established almost 100 years ago. Question 1 will allow comparisons with data from local tourism bureaus to better serve visitors in terms of types of lodging provided in the area. Question 2 is needed to find out if visitors are having difficulty finding their way to locations in the monument, which is diverse in its landscapes, activities offered and spans parts of two states. Question 3 provides feedback to managers on whether park situations are impacting visitor experience.

### Topic Area 3 - TRIPC33

1. If your personal group **did not** stay overnight away from home in the monument or area within 60 miles of the monument, what were the reasons for not staying overnight? Please mark (•) all that apply.
- Did not intend to stay overnight/unplanned visit
  - All lodgings were full/booked; could not obtain a reservation
  - Facilities lacked desired amenities (Please specify below)  
\_\_\_\_\_
  - Had lodging reservations elsewhere
  - Location not convenient
  - Lodging too expensive
  - Not the right type of campsite/lodging available
  - Other reasons (Please specify) \_\_\_\_\_

### Topic Area 3 - TRIPC12 Variation

2. a) Please mark (•) all mapping devices that your personal group used to direct your personal group to Dinosaur National Monument on this visit.
- None → **Go to Question 10**
  - GPS devices
  - Online mapping tools (GoogleMaps, YahooMaps, MapQuest, etc.)
  - Printed maps/brochures
  - Smartphone/tablet (such as iPads) mapping apps
  - Other (Please specify) \_\_\_\_\_
- b) Did your personal group have any difficulty locating the monument using the above devices?



Yes

No → Go to Question xx

c) If YES, what were the problems?

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**Topic Area 3 - TRIPC35 Variation**

3. Please indicate how the following elements may have affected your personal group's experience in Dinosaur National Monument. Please mark (●) one for each.

<b>Element</b>	<b>Did not experience</b>	<b>Detracted from</b>	<b>No effect</b>	<b>Added to</b>
Availability of ranger-guided programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cattle or sheep grazing in monument	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Light pollution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Litter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Noise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pets/visitors with pets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public access to the rivers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ranger presence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Signs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Visitors demonstrating poor resource stewardship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## Questions specific to Stones River National Battlefield

Stones River National Battlefield preserves the site of one of the bloodiest battles of the Civil War. The following questions are specific to Stones River. Question 1 is important since visitors often travel to many Civil War sites, including some that are not in the National Park System. Managers can better market the park's rules and regulations through learning visitors' awareness about the NPS. Question 2 will help learn about visitors' reaction, understanding and connection to the story being told at the site, allowing park managers to improve the interpretive programs if needed. Question 3 is important for park managers to learn about safety issues since visitors travel to Civil War sites in the park on their own.

### Topic Area 1 - KNOW2 Variation

1. a) **Prior to this visit**, was your personal group aware that **Stones River National Battlefield** is a unit of National Park System?

Yes  No

### Topic Area 1 - LEARN11 Variation

2. a) During this visit (viewing exhibits, movies, taking the tour, etc.), did you learn something about the Civil War that is relevant or meaningful to your life today?

Yes  No

- b) If YES, what is the most important way the Civil War has relevance to your life today?

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- c) What else can be done to help you to make a personal connection to the story presented at Stones River National Battlefield?

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### Topic Area 1 - TRIPC36

3. a) On this visit did you or members of your personal group have any specific safety concerns in Stones River National Battlefield?

Yes  No → **Go to Question xx**

- b) If YES, what were the concerns? \_\_\_\_\_

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## Questions specific to Springfield Armory National Historic Site

Springfield Armory National Historic Site offers a museum containing one of the world's largest small arms collections. The park has never had a visitor study since it was established in 1978, information about visitors is currently unavailable. Question 1 determines visitor awareness about site management by the National Park Service. Since parking can be an issue, Question 2 tallies the types of vehicles being driven to the park, the information will be used in collaborative planning with local communities. Question 3 is needed to obtain visitors' feedback on the park website and whether it is meeting visitor expectations. Question 4 is used to determine whether park employees, including volunteers, are serving the public well. Park managers are also trying to determine whether visitors attend ranger-led programs and if the interpretive programs were effective in delivering the park message. Questions 5 and 6 aim to assess visitors understanding of the national significance of the park and how effective interpretive program in delivering this message.

### Topic Area 1 - KNOW2

1. Prior to this visit, were you aware that Springfield Armory NHS is managed by the National Park Service?

Yes                       No

### Topic Area 3 - TRANS1 Variation

2. a) On this visit, which forms of transportation did your personal group use to travel between your overnight accommodations or home and Springfield Armory NHS? Please mark (•) all that apply.

- |  |  |
|--|--|
| <input type="radio"/> Private vehicle (car, SUV, pickup, RV, etc.) | <input type="radio"/> Public transit (bus, etc.) |
| <input type="radio"/> Rental vehicle                               | <input type="radio"/> Tour/school bus            |
| <input type="radio"/> Bicycle                                      | <input type="radio"/> Taxi/limousine             |
| <input type="radio"/> On foot                                      | <input type="radio"/> Motorcycle                 |
| <input type="radio"/> Other (Please specify) _____                 |  |

### Topic Area 2 - TPLAN6

3. a) Did your personal group obtain information from the park website (<http://www.nps.gov/spar>) to plan this trip to Springfield Armory NHS?

Yes                       No → Go to Question xx

b) Overall, how would your personal group rate the quality of information provided on the park website? 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"/>

c) Did your personal group find the information that you needed on the park website?

No                       Yes → Go to Question xx

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

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**Topic Area 3 – ACT28**

4. a) During this visit to Springfield Armory NHS, did your personal group obtain information from a National Park Service uniformed employee or volunteer?

Yes                       No → **Go to Question XX**

**Topic Area 6 – EVALSERVE10**

- b) If YES, using the scale below, please rate the quality of your interaction with the uniformed employee/volunteer. 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"/>

**Topic Area 3 – FVIS12 VARIATION**

5. a) On this visit to Springfield Armory NHS, did anyone in your personal group participate in any of the ranger-led talks/programs?

No                       Yes → **Go to Question xx**

- b) If NO, what prevented your personal group from participating in ranger-led talks/programs? Please mark (•) **all** that apply.

- Did not have time for this activity
- Not aware of any ranger-led talks/programs offered at park
- Not enough programs offered
- Not interested
- Other (Please specify) \_\_\_\_\_

**Topic Area 3 – LEARN9 VARIATION**

6. What significant work did Springfield Armory do that made it important to the United States?

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