OMB Control: 1024-0224
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(Listening Survey)

"Understanding and Managing Soundscapes in National Parks: Yosemite National Park Visitor Use Survey"

Today we are conducting a visitor survey that includes a listening portion which directs your attention to the sounds of the park. If you are interested in participating, you will be asked to **fill out a list to identify sounds you heard today**. This survey will be used to help the National Park Service (NPS) understand the effects of natural and human sounds in the park. This exercise is voluntary and anonymous. It will take approximately 15 minutes to complete. **[4. SOUND9]**

Step 1: The listening portion of this survey will be led by an NPS volunteer. Remember that all sounds are included, both human and natural.

Step 2: Close your eyes and relax, and keep track of each individual sound that you heard.

Step 3: While holding your concentration, focus on the sounds you have heard. Now, please take a moment to fill out the attached sheet before speaking with other participants about what you have heard. This exercise begins on the next page.

Step 4: Please write down **all the sound(s)** you heard during this exercise in the blank spaces (under the **SOUNDS** column) provided on page 2**.**

Step 5: Under the **ACCEPTABILITY OF SOUNDS AT THIS LOCATION** column, please circle one number which best describes how unacceptable or acceptable the sound was for this location in the park: The scale is on a continuum from: - 4 as very unacceptable, - 2 as slightly unacceptable, 0 as neutral, +2 as slightly acceptable, and + 4 as very acceptable.

Step 6: Under the **PERSONAL INTERPRETATION** column, please circle one number which best describes how pleasing or annoying the sound was to you: The scale is on a continuum from: -4 as very annoying, - 2 as slightly annoying, 0 as neutral, +2 as slightly pleasing, and + 4 as very pleasing.

Step 7: Under the **EFFECT THIS SOUND HAD ON YOUR EXPERIENCE** column, please circle one number which best describes the effect this sound had on your experience: The scale is on a continuum from: -4 as detracted greatly, - 2 as detracted somewhat, 0 as neutral, +2 as added somewhat, and + 4 as added greatly.

Step 8: Please answer a few questions about your visit to the park on page 3.

Step 9: Please answer a few questions about yourself and your group on page 4.

Thank you for your participation!

	ACCEPTABILITY OF SOUND AT THIS LOCATION	PERSONAL INTERPRETATION OF THIS SOUND	EFFECT THIS SOUND HAD ON YOUR EXPERIENCE

SOUNDS	Very unacceptable sound		Slightly unacceptable sound		Neutral		Slightly acceptable sound		Very acceptable sound	Very annoying sound		Slightly annoying sound		Neutral		Slightly pleasing sound		Very pleasing sound	Detracted greatly from my experience		Detracted somewhat from my experience		Neutral		Added somewhat to my experience		Added greatly to my experience
1.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
2.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
3.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
4.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
5.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
6.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
7.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
8.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
9.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
10.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
11.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
12.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
13.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4
14.	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4	-4	-3	-2	-1	0	+1	+2	+3	+4

1. Visitors have different reasons for camping in the Tuolumne Meadows campground. How important to you was each of the following reasons for camping in the Tuolumne Meadows campground? (Check one box for each item) **[4. PREF1]**

	Not important at all	**Slightly important**	**Moderately important**	**Very important**	**Extremely important**
Being in Tuolumne Meadows	❒	❒	❒	❒	❒
Enjoying peace and quiet	❒	❒	❒	❒	❒
Being with family/friends	❒	❒	❒	❒	❒
Getting away from crowds in the Yosemite Valley area	❒	❒	❒	❒	❒
Getting exercise	❒	❒	❒	❒	❒
Experiencing nature “up-close”, away from park facilities.	❒	❒	❒	❒	❒
Appreciating the natural scenery	❒	❒	❒	❒	❒
Hearing the sounds of nature.	❒	❒	❒	❒	❒
Experiencing solitude	❒	❒	❒	❒	❒
Viewing the night-sky without the glow from artificial lights	❒	❒	❒	❒	❒
Learning about Native American culture and history.	❒	❒	❒	❒	❒
Other: _____	❒	❒	❒	❒	❒

2. Please indicate how your experience of each of the following items during your stay in the Tuolumne Meadows campground compared with your expectations. (Check one box for each item) **[5. CROWDATT12]**

	How did it compare to your expectations?					
	I had no expectation	**A lot less than expected**	**Less than expected**	**About as expected**	**More than expected**	**A lot more than expected**
Number of people you saw in the campground	❐	❐	❐	❐	❐	❐
Cleanliness of the bathroom facilities	❐	❐	❐	❐	❐	❐
Crowding of campsites	❐	❐	❐	❐	❐	❐
Ease of access to trailheads and attraction sites	❐	❐	❐	❐	❐	❐
Opportunity to experience sounds of nature	❐	❐	❐	❐	❐	❐
Amount of time during the trip you heard aircraft	❐	❐	❐	❐	❐	❐
Other: _____	❐	❐	❐	❐	❐	❐

3. How satisfied or dissatisfied were you with the opportunity to experience the natural quiet and sounds of nature while camping in the Tuolumne Meadows campground? (Check one) **[4. PREF1]**

Extremely dissatisfied	**Very dissatisfied**	**Moderately dissatisfied**	**Slightly dissatisfied**	**Neither**	**Slightly satisfied**	**Moderately satisfied**	**Very satisfied**	**Extremely satisfied**
❐	❐	❐	❐	❐	❐	❐	❐	❐

4. For each of the following types of sounds, please indicate if you have been disrupted by the sounds during your stay in the Tuolumne Meadows campground. (For each sound, check all that apply.) **Topic Area 6, Individual Perceptions of their Park Experiences]**

Sound	Sleep was disrupted	Disrupted during the morning	Disrupted during the mid-day	Disrupted during the evening	Not at all disrupted by the sounds
Voices from other campers	❒	❒	❒	❒	❒
Electronics from other campers (radios/stereos)	❒	❒	❒	❒	❒
Generators	❒	❒	❒	❒	❒
Cars in the campground	❒	❒	❒	❒	❒
Cars outside the campground	❒	❒	❒	❒	❒
Motorcycles in the campground	❒	❒	❒	❒	❒
Motorcycles outside the campground	❒	❒	❒	❒	❒
Park operation vehicles	❒	❒	❒	❒	❒
Park maintenance activities.	❒	❒	❒	❒	❒
Dumpsters	❒	❒	❒	❒	❒
Ranger programs	❒	❒	❒	❒	❒
Aircraft	❒	❒	❒	❒	❒
Other: _____	❒	❒	❒	❒	❒

5. a) Have you ever camped in the Tuolumne Meadows campground before this visit? (Check one) **[1. VISITHIS1]**

❒ **Yes** ❒ **No** ***Skip to Question 5***

b) Approximately how many times have you camped in the Tuolumne Meadows campground in the last 12 months?

Approximate number of visits: _____

c) Approximately how long was your stay in the Tuolumne Meadows campground? **[1. VISITHIS1]**

Number of nights stayed: _____

6. a) On this visit, what kind of personal group were you with? Please mark **one**. Your personal group is anyone you were camping with, such as spouse, family, friends, etc. This does not include larger groups, such as school, church, scouts, or tours. **[1. Variation GR6]**

❒ **Alone** ❒ **Family**
❒ **Friends** ❒ **Family and friends**
❒ **Other (Please specify) _____**

b) On this visit, how many people were in your personal group, including yourself? **[1. GR3]**

Approximate number of people: _____

7. a) Were you and your personal group part of a larger group? (Check one) **1. Variation GR6]**

❒ **Yes** ❒ **No** ***Skip to Question 7***

b) If YES, what type of larger group were you and your personal group part of? (Check one) **1. Variation GR6]**

❒ **Commercial guided tour group** ❒ **School/ educational group**

- ❒ **History club/ elder hostel**
- ❒ **Family reunion group**
- ❒ **Other organized group (such as business group, scout group, etc.)**

c) How many people in total were in this larger group? **1. Variation GR6]**

Approximate number of people: _____

8. Were you camping in a tent or an RV? (Check one) **1. Variation GR6]**
   ❒ **Tent** ❒ **RV** ❒ Other:_____

9. What is your gender? (Check one) **[1. GEND2]**
   ❒ **Male** ❒ **Female**

10. In what year were you born? **[1. AGE1]** **Year born: _____**

11. Do you live in the United States? (Check one) **[1. RES3]**
   - ❒ **Yes (What is your zip code? _____)**
   - ❒ **No (What country do you live in? _____)**

Topic Area 1 – Individual Characteristics

12. How would you describe **your current** residence or community? (Check one)
   - ❒ **Large city with 250,000 or more people**
   - ❒ **City with 100,000 to 249,999 people**
   - ❒ **City with 50,000 to 99,999 people**
   - ❒ **Small city with 25,000 to 49,999 people**
   - ❒ **Town with 10,000 to 24,999 people**
   - ❒ **Town with 5,000 to 9,999 people**
   - ❒ **Small town with < 5,000 people**
   - ❒ **A farm or rural area**

13. What is the highest level of formal education you have completed? (Check one) **[1. Variation ED1]**
   - ❒ **Less than high school**
   - ❒ **Some High school**
   - ❒ **High school graduate**
   - ❒ **Vocational/trade school certificate**
   - ❒ **Some college**
   - ❒ **Two-year college degree**
   - ❒ **Four-year college degree**
   - ❒ **Masters degree**
   - ❒ **Ph.D, M.D., J.D., or equivalent**

14. Are you Hispanic or Latino? **[1. RACE/ETH3]**
   ❒ **Hispanic or Latino** ❒ **Not Hispanic or Latino**

15. What is your race? (Check one or more) **[1. RACE/ETH3]**
   - ❒ **American Indian or Alaskan Native**
   - ❒ **Asian**
   - ❒ **Black or African American**
   - ❒ **Native Hawaiian or other Pacific Islander**
   - ❒ **White**

Thank you for your participation.

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16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. All data will be anonymous. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB number.

OMB control number: OMB #1024-0224

Expiration Date: July 30, 2011

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