****OMB Number: 1024- 0224

Expires: XX/XX/XXXX

**Acadia National Park**

**2015 Isle au Haut Visitor Experience**

**Hiking Survey**

**Topic Area 3:** TRIPC8

1. Approximately how much time did you spend hiking on Isle au Haut today?

Length of hike (hours and/or minutes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Topic Area 5**: CROWD15.

2. What is the approximate number of other groups of hikers you saw while hiking the trails on Isle au Haut today?

 Approximate number of groups\_\_\_\_\_\_\_\_\_\_\_\_\_

**Topic Area 5**: CROWD1

3. How crowded did you feel along the trails on Isle au Haut today? (circle one number)?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Not at all crowded | Somewhat crowded | Moderately Crowded | Very Crowded | Extremely crowded |
| 1 | 2 | 3 | 4 | 5 |

**Topic Area 1:** VISITHIS2

4. a. Have you visited Isle au Haut before? (check one)

 Yes\_\_\_\_\_ No\_\_\_\_\_\_

 b. If yes, approximately how many times have you visited Isle au Haut before today?

 Number of previous visits\_\_\_\_\_\_\_\_\_

**Topic Area 1:** GR3

5. How many people were in your group?

Number of people\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Topic Area 1**: AGE2

6. What year were you born?

 Year born\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Topic Area 1:** GEND

7. What is your gender (check one)?

 Female\_\_\_\_\_\_\_\_\_ Male\_\_\_\_\_\_\_\_\_

*Thank you for your help.*

**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 park managers to manage for a high quality hiking experience at the Acadia National Park - Isle au Haut district. Your response to this request is completely voluntary and no action may be taken against you for refusing to supply the information requested. Your responses will be anonymous. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number.

**Burden Estimate Statement**: The estimated time to complete this collection is 3 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to: Charlie Jacobi, Acadia National Park, 20 McFarland Hill Dr., Bar Harbor, ME 04609, Charlie\_jacobi@nps.gov (email).

Number\_\_\_\_\_\_\_\_\_\_\_\_ Date/Time\_\_\_\_\_\_\_\_\_\_\_\_ Site\_\_\_\_\_\_\_\_\_\_\_\_\_ Interviewer\_\_\_\_\_\_\_\_\_\_\_\_

(The above information will be entered by the interviewer.)