

National Park Service U.S. Department of the Interior

OMB Control Number: 1024-0224 Expiration Date: 5-31-2019

Eisenhower National Historic Site

Visitor Study

[Place holder for photo/image]

Paperwork Reduction Act Statement: The National Park Service is authorized by the NPS Research Mandate (54 USC 100702) to collect this information. We will use this information to evaluate visitor services cooperatively managed by Eisenhower National Historic Site. 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. A federal 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: We estimate that it will take about 20 minutes to complete this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection to: Matt Strawn, Study Director, SESRC, Wilson-Short Hall #133, Washington State University, Pullman, WA 99164-4014, 509-335-2350 (phone), matthew.strawn@wsu.edu (email).



IN REPLY

REFER TO:

United States Department of the Interior

NATIONAL PARK SERVICE

Eisenhower National Historic Site 1195 Baltimore Street Gettysburg, PA 17325

June 2017

Dear Visitor:

Thank you for participating in this important study. We want to learn about your opinions on transportation and related services at Eisenhower National Historic Site. This information will help us improve our management of this site and improve transportation services to better need your needs.

This questionnaire was given to only a few visitors, so your participation is very important. It should take about 20 minutes complete.

We are asking that you complete this questionnaire at the end of your visit. When you are seal and return it by using the in the postage-paid envelope provided. You can drop it in any U.S. mailbox.

If you have any questions, please contact Matt Strawn, Study Director, SESRC, Wilson-Short Hall #133, Washington State University, Pullman, WA 99164-4014, 509-335-2350 (phone), matthew.strawn@wsu.edu (email).

We appreciate your help.

Sincerely,

Superintendent

Please go on to the next page

TOPIC AREA 2- INFOSOURCE9

Your Visit To Eisenhower National Historic Site

1a.	Prior to this trip, how did you obtain information about Eisenhower National Historic

1a.	Prior	to this trip, how did you obtain information about Eisenhower National Historic Site?							
		e mark (●) all that apply.							
	0	Did not obtain information prior to this visit							
	0	Previous visits							
	O Friends/relatives/word of mouth								
	0	Inquiry to park via phone, mail, or email							
	0	Eisenhower National Historic Site website (nps.gov/eise)							
	0	Gettysburg National Military Park website (nps.gov/gett)							
	0	Other website (Please specify)							
	0	Local businesses (hotels, motels, restaurants, etc.)							
	0	Maps/brochures							
	0	Newspaper/magazine articles							
	0	Other units of the National Park System (NPS)							
	0	School class/program							
	O Social media (such as Facebook, Twitter, etc.)								
	O State welcome center/visitors bureau/chamber of commerce								
	0	Television/radio programs/DVDs							
	0	Travel guides/tour books (such as AAA, etc.)							
	0	Other (Please specify)							
TOPI	C ARE	A 2- INFOSOURCE13							
1b.		ou have the information about Eisenhower National Historic Site you needed on this Please mark (•) one. Yes No (Please specify information you needed but didn't have on this trip.)							

TOPIC AREA 2- ITIN1

- 2. How would you describe your planning for this trip? (Please select only one response)
- O Carefully planned
- O Some pre-planning
- O Very little pre-planning

O Spontaneous; no planning

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- 3. How did your visit to Eisenhower National Historic Site fit into your travel plans? Please mark (●) only one.
- O Eisenhower National Historic Site is my primary destination
- O Eisenhower National Historic Site is one of several destinations
- O I am passing through the park to my primary destination
- O I did not plan to visit Eisenhower National Historic Site

TOPIC AREA 4: DEST7

- **4.** On this visit, did you and your personal group visit Eisenhower National Historic Site on more than one day? Please list partial hours/days
- O No -> If NO, how many hours in total did you spend visiting ____ number of hours
- O Yes → If YES, on how many days did you visit the site? ___ number of days

TOPIC AREA 2: ITIN9

- 5. Were you aware of the tour reservations system at Eisenhower National Historic Site?
- O Yes → Did you use it to make reservations prior to your visit? O Yes O No
- O No \rightarrow How did you learn about the tours? (Skip to Question 7)

TOPIC AREA 2: ITIN10

- **6.** If you responded YES to the question above, did you get the tour reservation by calling the toll-free telephone number, by going online to the National Park Service website, or Gettysburg Foundation Website?
 - O Calling phone number
 - O Online to the National Park Service website
 - O Gettysburg Foundation Website

TOPIC AREA 3: TRANSMODE3

- 7 a) What forms of transportation did you and your group use to arrive at the Gettysburg National Military Park Museum and Visitor Center? Please mark (●) all that apply.
 - O Private vehicle (car, SUV, pickup, RV, motorcycle, etc.)
 - O Rental vehicle
 - O Tour motorcoach/bus
 - O Hotel shuttle van/courtesy bus
 - O Taxi/Uber
 - O Bicycle
 - O On foot
 - O Other (Please specify:_____
- b) If your group arrived at the Gettysburg National Military Park Museum and Visitor Center in private or rental vehicles, how many **vehicles** did you and your group use?

Number of vehicle	-
Millimper of venicle	3 C.

TOPIC AREA 3: PARKING 5

- 8. When you planned this trip to Eisenhower National Historic Site, did you think about the possibility that it might be difficult to find parking here?
 - O Yes
 - O No

TOPIC AREA 3: TRANSEVAL6

9. To what extent did the following factors impact your visit to Eisenhower National Historic Site? Please mark (●) one answer for each factor

	Not at all	Very little	Somewhat	To a great extent	Not applicable
Lack visual indication of arrival	0	0	0	0	0
Parking congestion/shortages	0	0	0	0	0
Lack of shuttle service/options	0	0	0	0	0
Unacceptable shuttle wait times	0	0	0	0	0
Passenger crowding on shuttles-	0	0	0	0	0
Lack of accessibility for people with disabilities	0	0	0	0	0
Pedestrian/vehicle conflicts	0	0	0	0	0
Other (Please specify))	0	0	0	0	0

TOPIC AREA 3: PARKING20

10. Imagine that when you arrived at the Museum and Visitor Center a road sign notified you that parking lots were full, but that you could park at another location and ride a shuttle bus to the Gettysburg Museum and Visitor Center where you would be able to ride a different shuttle bus to Eisenhower National Historic Site. What would you do? (Please select on one response.)

- O Drive into Gettysburg Museum and Visitor Center and look for parking anyway
- O Park in the lot near the Museum and Visitor Center and ride the shuttle bus into Eisenhower National Historic Site
- O Leave and come back later in the day when you could find parking in Museum and Visitor Center
- O Go to a different recreation area instead (Please specify):
- O Other (Please specify):

TOPIC AREA 3: TRANSERV16

11.	a. On this	visit. did	vou use the	Eisenhower	Shuttle?

- O Yes O No → Go to question 12
- b. Would you use the Eisenhower Shuttle again?
 - O Definitely yes
 - O Probably yes
 - O Don't know
 - O Probably not
 - O Definitely not
 - O Will not be back

TOPIC AREA 3: TRANSERV17

12. If you were to visit Eisenhower National Historic Site again in the future, how important would the following improvements be in your decision to use the shuttle bus? Please mark (●) one for each item.

	Not at all important	Somewha t important	Moderatel y important	Very importan t	Extremely important
More frequent bus shuttle service	0	0	0	0	0
Earlier morning service	0	0	0	0	0
Later evening service	0	0	0	0	0
Better visitor information at pass sales outlets, at bus stops, on buses	0	0	0	0	0
More parking/better defined parking at Eisenhower National Historic Site	0	0	0	0	0
Better amenities at bus stops (i.e., shelters, restrooms)	0	0	0	0	0
Other (specify)	0	0	0	0	0

TOPIC AREA 3: TRANSERV28	
13. What transportation related issues, if any, did you face when during your visit?	
TOPIC AREA 2: ACCOMM2 AND TOPIC AREA 1: RES3	

14.		ou live in the local area within 50 m ark (●) one.	iles c	of Eisenhower National Historic Site? Please						
	0	Yes→ Go to Question 15	0	No						
	b) If No, how much time in total did you spend in the local communities?									
	_	Total number of hours, if days, if mo								
	c) If	you stayed overnight in the local ar	ea, w	hat type of accommodation did you use?						

- O Hotel, motel, B&B
- O Camping
- O Personal seasonal residence
- O Residence of friends or relatives
- O Other, please specify:_____

TOPIC AREA 4: DEST1

- 15. Upon arrival, were you able to find your destination using the road signs and maps posted? Please mark (●) one.
 - O Yes, I found my destination easily
 - O Yes, I found my destination but it took some time
 - O No, I was unable to find my destination with road sign and maps
 - O We didn't use road signs and/or posted maps

IOP	OPIC AREA 2: INFOSOURCE17								
16	a) Please mark (a) all manning devices that your personal group u								

16.		Please mark (●) all mapping devices that your personal group used to arrive at Eisenhower National Historic Site on this visit.							
	C	0	None → Go to Qu	estion	17				
	(С	GPS devices						
	(0	Online mapping tools (Google Maps, Yahoo Maps, MapQuest, etc.)						
	(C	Printed maps/brochures						
	(C	Smartphone/table	et (iPad,	iPhone, Android, etc.) mapping apps				
	(C	Other (Please spe	cify)					
	•	,	r personal group h ne above devices?	ave any	difficulty locating Eisenhower National Historic Site				
	()	Yes	0	No → Go to Question 17				
	c) I	If YES, v	what were the prol	olems? ₋					

TOPIC AREA 5: DEST3

- 17. Were you and your personal group able to visit all of the locations in Eisenhower National Historic Site that you planned to?
 - O Yes
 - O No

TOPIC AREA 4: DEST4

- 18. If you answered NO to question 17, what reasons prevented you from visiting those locations? Please mark (●) all that apply.
 - O Not enough time
 - O Trail closure
 - O Road closure
 - O Bad weather
 - O Inadequate display of road / map signs
 - O Unsafe road
 - O Other (please specify):_____

TOPIC AREA 4: DEST6

19. On this trip, if you and your personal group had not chosen to visit Eisenhower National Historic Site, what other NPS SITE would you have visited instead?

I \ II \ C \ ' II ' II \ I' \ NDC CITE C \ I \ 2

b) How far is this alternative NPS SITE from your home? _____ miles

IOP	IC AREA 4:	DEST11								
20.		ons for changing	your pla	yed for a shorte ans? Please mar than expected		ger time than planned, what were that apply.				
	0	More things to do/see than expected								
	0	Longer wait at	Eisenho	wer National Hi	storic Si	te than expected				
	0	Shorter wait a	t Eisenho	wer National H	istoric S	ite than expected				
0	Unable	e to obtain a tick	et for Eis	senhower Natio	nal Histo	oric Site				
0	Other	(Please specify)								
TOP	IC AREA 4:	DEST12								
21.		nge or changes nin 50 miles)?	would m	ake you stay lor	iger in t	he Eisenhower National Historic Site				
TOD	OIC ADEA 6.	EVALSERV20								
IOF	IC ARLA U.	LVALJLKVZO								
22 a) T	for each o	k the ranger-led of the following ssed on tour we	aspects c		ıring thi	s visit, please select one response				
	0	Of interest	0	Not of interest	:					
b) T	our/progra	m length was:								
	Ο	Too short	0	About right	0	Too long				
c) Ti	ming of pro	ograms/ Taking	tour at d	esired time tou	r at desi	red time				
	O Able	e to take tour at	desired	time O Not	able to	take tour at desired time				

d) Ability to see interior of room due to tour size

Able to see O Not able to see

0

e) Historic appearance of rooms

Very poor	Poor	Average	Good	Very good
0	0	0	0	0

TOPIC AREA 6: EVALSER28

- 23. Below are the list of visitor services provided at Eisenhower National Historic Site
 - a) In column (a), please rate the importance of the services listed to your visit from 1-5.
 - b) Next, Please mark all the visitor services that you or your personal group used during this visit to Eisenhower National Historic Site
 - c) Finally, for only those services and facilities that you or your personal group used, please rate their quality from 1-5

A Importance 1= Not important 2= Somewhat important 3= Moderately important 4= Very important 5= Extremely important	Visitor Services	B Used during your visit?	C Quality 1= Very poor 2= Poor 3= Average 4= Good 5= Very good
1 2 3 4 5	Assistance from park rangers	☐ YES ☐NO	(1) (2) (3) (4) (5)
① ② ③ ④ ⑤	Ranger-led programs	☐ YES ☐NO	① ② ③ ④ ⑤
① ② ③ ④ ⑤	Indoor exhibits	☐ YES ☐NO	① ② ③ ④ ⑤
0 2 3 4 5	Outdoor exhibits	☐ YES ☐NO	0 2 3 4 5
0 2 3 4 5	Park brochure/map	☐ YES ☐NO	0 2 3 4 5
0 2 3 4 5	Park newspaper	☐ YES ☐NO	0 2 3 4 5
1 2 3 4 5	Visitor center bookstore sales items	☐ YES ☐NO	1) 2 3 4 5
1) 2 3 4 5	Visitor center movies/videos	☐ YES ☐NO	0 2 3 4 5
1) 2 3 4 5	Junior Secret Service Program	☐ YES ☐NO	1) 2 3 4 5
1) 2 3 4 5	Park website: www.nps.gov/eise used before or during visit	□ YES □NO	① ② ③ ④ ⑤

24.	I. Overall, how would you and your group rate the quality of facilities, services, and recreational opportunities at Eisenhower National Historic Site during this trip? Please circle only one.						
	O Very poor	O Poor	Average	O Go	ood (Very good	
TOP	IC AREA 6: EVALSER22						
25.	What did you like mo	st about your vi	sit to Eisenhower N	National His	toric Site?		
26.	What did you like leas	t about your vi	sit to Eisenhower N	National His	toric Site?		
TOP	IC AREA 1: GROUP5						
27.	Including yourself, ho Eisenhower National I						
	Number of	adults (18 year	rs or older)				
	Number of	children (unde	r 18 years)				
TOP	IC AREA 1: GROUP1						
28.	Please select the choic O Alone O Family only O Friends only O Family and frier O Other (Please sp	nds	est describe your p	personal gro	oup? Please	mark (●) one .	
29. V	29. Were you and your personal group part of the following organized group? Please mark (●) Yes or No for each type of organized group.						
Part	of the group?			Yes	No		
Com Scho Histo	mercial guided tour gro pol/educational group prical society cial interest club	oup (i.e. packago	e tour)	0 0 0	0 0 0 0	_	

TOPIC AREA 1: GROUP 3

30. For your personal group, on the day you were contacted for this survey, please provide the following information. (If you don't know the answer, enter "DK.")

	Current Age	U.S. ZIP code or name of country other than U.S.	Number of visits to Eisenhower NHS in last 12 months, including this trip	Gender		
		other than 0.5.		Female	Male	No answer
Yourself Member #2 Member #3				0 0 0	0 0 0	0 0 0
Member #4 Member #5				0 0	0	0 0
Member #6 Member #7				0	0	0

TOPIC AREA 1: GROUP7

31.	a)	Did anyone in your personal group have a physical condition that made it difficult to
		access or participate in park activities or services, during your visit to Eisenhower
		National Historic Site? Please mark (●) one.

0	No -	Go to	Questi	ion 32
---	------	-------	--------	--------

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

- c) Because of the physical condition, which specified difficulties did the person(s) have? Please mark (●) all that apply.
 - O Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits or programs, or information desk staff even with hearing aid)
 - O Visual (difficulty in seeing exhibits, directional signs, visual aids that are part of programs even with prescribed glasses or due to blindness)
 - O Mobility (difficulty in accessing facilities, services, or programs even with walking aid and/or wheelchairs)
 - O Other (Please specify)

TOPIC AREA 1: GROUP10

32. If Eisenhower National Historic Site were to offer assistive media or equipment for visitor use, which of the following would be used by a member of your group? Please mark (•) Yes or No for each service.

Service	Need to use		
	Yes	No	
Electric golf cart	0	0	
Loaner wheelchair	0	0	
Digital media/materials	0	0	
Audio description	0	0	
Assistive listening device	0	0	
Braille or large print media	0	0	

Other?	(Please be specific)		
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TOPIC AREA 4: FVIS1					
33. Would you consider visiting Eisenhower National Historic Site again? O Yes, likely → if Yes why O No, unlikely → if No, why not O Not Sure					

- **TOPIC AREA 4: FVIS2**
- 34. If you were to visit Eisenhower National Historic Site in the future...
 - a) would you and your personal group be interested in attending ranger-led programs?
 - O Yes, likely
 - O No, unlikely
 - O Not sure

If YES, what length of program would you [and your personal group] like to attend?

- O Under 1/2 hour
- O 1/2 1 hour
- O 1 2 hours
- O Other (Please specify)
- b) what would encourage you to attend a ranger-led activity/program?
 - O Nothing \rightarrow go to question 35
 - O Programs scheduled more often
 - O Greater variety of program topics
 - O Greater variety of types of activities
 - O Other reasons (Please specify)

		rk (•)	subjects would you and your group be most intereste all that apply. Eisenhower Military Career Eisenhower Presidential Career Mamie Eisenhower, Civil Rights Conservation Farming and Cattle Operations Histor Other (Please specify)	-
	35.		interpretive programs/information services would y o have available at the park? Please mark (●) all that	
	0	N	ot interested in interpretive programs 💙 Go on t	to Question 36
	0	Ro	oving rangers available to answer questions	
	0	Ra	angers on tour bus	
	0	Ra	anger talks/programs (other than on tour)	
	0	Ca	ampfire programs	
	0	Ni	ight sky programs	
	0	In	door exhibits	
	0	Cł	nildren's programs	
	0	O	utdoor exhibits	
	0	po	ectronic media/devices available to visitors (downloadcasts, cell phone tours/apps, interactive computer ther (Please specify:	tours, audio, etc.)
ТОР	IC AF	REA 6:	OPMNMT1	
36.	Is th	nere ar	nything else you would like to tell us about your visit	?
-				
•			for your help! Please seal the questionnaire with th t in any U.S. mailbox.	e stickers provided
			⊕	Printed on recycled paper