

U.S. Department of the Interior

DOI Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery “Fast Track”

Suite of Questions

OMB Control No. 1090-0011



INSTRUCTIONS FOR USE

Bureaus/offices should utilize this Suite of Questions when developing questionnaires for submission to the Office of Management and Budget (OMB) under the DOI “Fast Track” generic clearance. Questionnaires should be limited to no more than 15 questions (with a maximum of 2 open-ended questions) and should take no longer than 10-15 minutes to complete. For assistance, please contact your [Bureau/Office Information Collection Clearance Officer](#) for assistance.

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General Respondent Characteristics

- A-1** Name of Respondent
- A-2** Organization Name
- A-3** Respondent contact information [*i.e., address, phone, email, etc.*]
- A-4** Respondent Age [*Asking for specific age*]
- A-5** What is your age? [*Providing range of age options*]
 - [*Insert drop down selections*]
- A-6** What year were you born?
- A-7** What school do you attend?
- A-8** Where were you born?
- A-9** What [*Insert city or zip code*] do you live in?
- A-10** Which nearby [*Insert neighborhood or state area*] do you live in?
 - [*Insert drop down selections*]
 - Other (Please specify)
- A-11** What is your [*Insert state or country*] of residence?
- A-12** If you are from the United States, what state are you from?
- A-13** How long have you lived in [*Insert location*]?
- A-14** Marital status
 - Single
 - Married
 - Living with a life partner
 - Divorced
 - Widowed
- A-15** Including yourself, how many people reside in your household?
- A-16** How many children under the age of [#] reside in your household?
- A-17** Gender
 - Male
 - Female
 - Transgender
 - Prefer not to say
 - Other (Please specify)
- A-18** What race do you identify with?
 - American Indian or Alaska Native
 - Asian
 - Black or African American
 - Native Hawaiian or Other Pacific Islander
 - White
 - Some other race or ethnicity
 - Mixed (Optional: Specify _____)
- A-19** Are you Hispanic or Latino?
 - Yes
 - No
- A-20** Language(s) spoken (Select all that apply)
 - [*Insert drop down selections*]
 - Other (Please specify)
- A-21** What language (if any other than English) is frequently spoken in your home? (Select all that apply)
 - [*Insert drop down selections*]
 - Other (Please specify)
- A-22** Education Level (Select one)

- High school or GED/alternative credential
- Some college
- Associate degree
- Bachelor's degree
- Master's degree
- Professional degree beyond bachelor's degree
- Doctorate degree
- Professional certification/license

A-23 What was your approximate household income from all sources (before taxes) last year? (Select one)

- *[Insert drop down selections]*

Professional Affiliations

A-24 Congressional District (Select one)

- *[Insert drop down selections]*
- I am unsure

A-25 Type of Agency, organization, or affiliation (Select one)

- *[Insert drop down selections]*
- Other (Please specify)

A-26 Agency/organization/affiliation contact information *[i.e., address, phone, email, website, etc.]*

A-27 Respondent's industry sector (Select one)

- *[Insert drop down selections]*
- Other (Please specify)

A-28 Size of the Agency, organization, or affiliation (Select one) *[Provide range options]*

- *[Insert drop down selections]*
- Other (Please specify)

A-29 Scale of business operations: (Select one) *[Provide scale options]*

- *[Insert drop down selections]*
- Other (Please specify)

A-30 Respondent's areas of decision-making authority in agency/organization/affiliation: (Select all that apply) *[Provide area options]*

- *[Insert drop down selections]*
- Other (Please specify)

A-31 I am a: (Select one)

- A Federal employee, NOT at the Department of the Interior
- A Federal employee, *[Insert bureau/office]*
- Not a Federal employee

A-32 Do you have a *[Insert bureau/office]* email account?

- Yes
- No

A-33 Select what best describes your professional organization: (Select one)

- *[Insert drop down selections]*
- Other (Please specify)

A-34 Select what best describes your role in your agency/organization/affiliation: (Select all that apply)

- *[Insert drop down selections]*
- Other (Please specify)

A-35 What institution/organization are you affiliated with? (Select one)

- *[Insert drop down selections]*
- Other (Please specify)

A-36 Which of the following best describes your office? (Select one)

- *[Insert drop down selections]*

- Other (Please specify)
- A-37** What field or discipline do you represent? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- A-38** What role best describes your relation to *[Insert bureau/office]*? (Select one)
 - *[Insert drop down selections]*
 - Other (Please specify)
- A-39** In what state are you located?
 - *[Insert drop down selections]*
 - Other (Please specify)

Communication

- B-1** Do you want to be contacted for future meetings and updates?
- Yes *[If yes, prompt for contact information (e.g., address, phone, email, etc.)]*
 - No
- B-2** Do you currently receive news releases *[or insert specific type of information notices]* from the *[Insert bureau/office]* (either from *[Insert bureau/office email address]* or a local *[Insert bureau/office]* public affairs specialists in your area)?
- Yes
 - No
 - I am not sure
- B-3** Are *[Insert bureau/office]* national news releases *[or insert specific type of information notices]* relevant to you?
- Yes
 - No
- B-4** What types of updates are you interested in receiving from the *[Insert bureau/office]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- B-5** What is your coverage area?
- *[Insert drop down selections]*
 - Other (Please specify)
- B-6** Please indicate whether you follow *[Insert bureau/office]* on the below listed social media sites? (Select all that apply)
- *[Insert bureau/office social media site(s) with link(s)]*
- B-7** From the social media sites you researched, did you and your personal group receive the type of information about *[Insert Federal property name]* before your trip that you needed?
- Yes
 - No
- B-8** From the social media sites you researched, did you and your personal group receive the type of information about *[Insert Federal property name]* during your trip that you needed?
- Yes
 - No
- B-9** How satisfied were you with the information you received from the social media sites you researched? *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*
- B-10** Which of the social media sites listed below do you plan to share photos and information about your experience at *[Insert bureau/office]*? (Select all that apply)
- *[Insert bureau/office social media site(s) with link(s)]*
 - I do not plan to share photos or information about my trip.
- B-11** How did you first learn or hear about *[Insert Federal property name]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- B-12** How likely would you use a resource like *[Insert name of resource]* before or during your trip? (Select one) *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely nor Unlikely, Somewhat Likely, Extremely Likely]*
- *[Insert drop down selections]*
 - Other (Please specify)
- B-13** Which of the following methods do you prefer to receive information regarding your destination prior to your trip? (Select all that apply)
- *[Insert drop down selections]*

- Other (Please specify)
- B-14** The *[Insert bureau/office]* sends the right amount of news releases.
 - Yes
 - No
 - No opinion.
- B-15** How do you prefer to receive news updates from the *[Insert bureau/office]*?
 - *[Insert drop down selections]*
 - Other (Please specify)
- B-16** If you selected “emailed” news release, do you prefer: (Select all that apply)
 - *[Insert drop down selections]*
 - Not applicable
- B-17** What city or town do you live in?
 - *[Insert drop down selections]*
 - Other (Please specify)
- B-18** How do you get information on community events and activities? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- B-19** How can the *[Insert bureau/office]* better inform you of its programs? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- B-20** If you do not find the information you are looking for on the website, what other application(s) would you use to search for the information? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- B-21** Would you like to be removed from our contact list?
 - Yes - please remove me from your email list
 - No - I would like to continue to receive updates from the *[Insert bureau/office]*
- B-22** Preferred date of *[Insert meeting/conference/communication name or type]*.
- B-23** Please indicate your level of agreement with the following statements about your experience: *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- B-24** Would you or any member of your personal group prefer to receive information about *[Insert document/program name]* in languages other than English?
 - Yes
 - No
- B-25** What additional languages should the *[Insert document/program name]* be provided in (other than English)? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)

Trip Planning and Logistics

- C-1** Where do you plan to start your trip in *[Insert Federal property name]*? (Select one)
- *[Name(s) of possible entry location(s)]*
 - Other (Please specify)
- C-2** Where do you plan to enter *[Insert Federal property name]*? (Select one)
- *[Name(s) of possible entry location(s)]*
 - Other (Please specify)
- C-3** Where do you plan to end your trip in *[Insert Federal property name]*? (Select one)
- *[Name(s) of possible exit location(s)]*
 - Other (Please specify)
- C-4** Where do you plan to exit *[Insert Federal property name]*? (Select one)
- *[Name(s) of possible exit location(s)]*
 - Other (Please specify)
- C-5** Approximately how far, in miles or kilometers, do you plan to travel in *[Insert Federal property name]* on this trip? _____ miles kilometers OR Don't know/not sure
- C-6** Where did you end your trip today in *[Insert Federal property name]*? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- C-7** Where did you end exit *[Insert Federal property name]*? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- C-8** Did your group end your trip or exit *[Insert Federal property name]* earlier than, later than, or on the same day as originally planned? (Select one)
- Earlier than originally planned
 - Later than originally planned
 - On the same day as originally planned
 - Other (Please specify)
- C-9** Have you visited *[Insert Federal property name]* before?
- Yes
 - No
- C-10** If you previously visited *[Insert Federal property name]* before, how many times have you visited?
- C-11** What activities did you participate in while visiting *[Insert Federal property name]* (Select all that apply)?
- *[Insert drop down selections]*
 - Other (Please specify)
- C-12** Which of the following are goals of your trip or stay in the *[Insert Federal property name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- C-13** How far did you travel to *[Insert Federal property name]*? _____ miles kilometers OR Don't know/not sure
- C-14** How long did it take you to travel to *[Insert Federal property name]*? _____ minutes hours OR Don't know/not sure
- C-15** Which modes of transportation did you use on your most recent visit to the *[Insert Federal property name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- C-16** Do you plan to visit *[Insert Federal property name]* again in the next *[-#-#]* months?
- Yes
 - No

- C-17** Do you or does anyone in your personal group require the use of an assistive device to walk or get around (e.g., cane, seeing-eye dog, or wheelchair)? (Select all that apply)
- [Insert drop down selections]
 - Other (Please specify)
- C-18** Did you and your personal group require the use any of the assistive devices/equipment available at [Insert Federal property name]?
- C-19** If you or any one in your group used any of the assistive devices/equipment available at [Insert Federal property name], did you find the equipment easy to use?
- Yes
 - No
- C-20** Are you traveling with a pet today?
- Yes. If yes, please specify pet type(s): _____
 - No
- C-21** Did you use a GPS device to navigate around the [Insert Federal property name]?
- Yes
 - No
- C-22** On this trip, which of the following electronic device did you use it to obtain transportation or travel related information?
- [Insert drop down selections]
 - Other (Please specify)
 - I do not typically carry portable electronic devices
- C-23** What is the goal of your trip to [Insert Federal property name]? (Select all that apply)
- [Insert drop down selections]
 - Other (Please specify)
- C-24** How important was each of the following in your decision to take this [Insert trip type] trip? (Select one box for each item) *[Use 5-point scale: Not at all Important, Slightly Important, Moderately Important, Very Important, Extremely Important]*
- [Insert drop down selections]
 - Other (Please specify)

Camping/Backcountry/Wilderness

- C-25** Do you plan to start your camping trip in [Insert Federal property name]?
- Yes, I plan to start my camping trip in [Insert Federal property name].
 - No, I plan to start my camping trip outside of [Insert Federal property name].
- C-26** What is the date of the first night you plan to camp in [Insert Federal property name]?
- C-27** Do you plan to end your camping trip in [Insert Federal property name]?
- Yes, I plan to end my camping trip in [Insert Federal property name]
 - No, I plan to end my camping trip outside of [Insert Federal property name].
- C-28** How many nights do you plan on camping in [Insert Federal property name]? [Insert range of options]
- [Insert drop down selections]
- C-29** Have you found your campsite for the night?
- Yes
 - No
- C-30** If you did not find your campsite in [Insert Federal property name], what prevented you from finding a campsite?
- [Insert drop down selections]
 - Other (Please specify)
- C-31** When was the decision made to camp in this area tonight? Please note, this question asks about your decision to camp in this camping area, not your specific campsite.
- [Insert drop down selections]

- Other (Please specify)
- C-32** Which was the primary factor you considered when selecting where to set-up your campsite? Please note, this question asks about your decision about where to set-up your campsite, not the general camping area. (Select one - only the most important factor)
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-33** Please indicate your level of agreement with the following reasons about how your group selected its campsite for tonight. Please note, this question asks about your decision about where to locate your campsite, not the general camping area. (Select one for each item) *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-34** How much of the following did you notice in and around your campsite last night? (Select one for each item) *[Use 5-point scale: None at all, A little, Some, A lot, Don't Know]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-35** Now we would like to know how the amount of each of the above items you noticed affected your camping experience. Please indicate how the amount of each of the following items in and around your campsite last night affected your experience? (Select one for each item) *[Use 5-point scale: Detracted greatly, Detracted somewhat, Neutral, Added somewhat, Added greatly]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-36** How many other camping groups were you able to see or hear from your campsite last night? _____
- C-37** We would like to know how the number of other groups you could see or hear from your campsite last night affected your experience in camp. Please indicate how the number of other groups you could see or hear from your campsite last night affected your experience in camp? (Select one) *[Use 5-point scale: It added greatly to my experience, It added to my experience, It had no effect on my experience, It detracted from my experience, It detracted greatly from my experience]*
- C-38** Thinking about your camping experience last night only, please indicate your level of satisfaction with your campsite? (Select one) *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*
- C-39** Will you be camping in *[Insert Federal property name]* tonight? (Select one)
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-40** We would like to know how the time you spend camping in *[Insert Federal property name]*, as a whole, compared with your expectations. Thinking about your camping trip in *[Insert Federal property name]* as a whole, please indicate how your experience of each of the following items compared with your expectations. (Select one for each item) *[Use 6-point scale: I had no expectations, A lot less than expected, Less than expected, About as expected, More than expected, A lot more than expected]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-41** Please indicate to what extent you agree or disagree with the following statements about your participation in this camping survey. (Select one for each item) *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-42** Do you consider yourself to be the leader or organizer of your camping group?
 - Yes
 - No
- C-43** Including this one, approximately how many wilderness or backcountry camping trips total have you taken in *[Insert Federal property name]*?

- C-44** Including this one, approximately how many overnight wilderness or backcountry camping trips have you taken in your lifetime? (Select one)
- C-45** Including this one, approximately how many overnight wilderness or backcountry camping trips have you taken in *[Insert Federal property name]* in the past *[-#-#]* *[Insert months/years]*? (Select one)
- C-46** How would you describe your route for this camping trip? (Select one)
 - *[Insert drop down selections]*
 - Other (Please specify)

Travel & Transportation

- C-47** Do you plan to use the services of a *[Insert service provider/guide option(s)]* on this trip?
 - Yes
 - No
- C-48** If your group utilized the *[Insert type of transportation provided]* courtesy of *[Insert Federal property name]*, did this service assist in making your trip possible?
 - Yes
 - No
- C-49** Did you utilize the *[Insert type of transportation provided]*?
 - Yes
 - No
- C-50** Please indicate how safe you felt using *[Insert type of transportation provided]*: *[Use 5-point scale: Very Unsafe, Somewhat Unsafe, Neutral, Safe, Very Safe]*
 - Before utilizing the *[Insert type of transportation provided]*
 - After utilizing the *[Insert type of transportation provided]*
- C-51** If you felt unsafe utilizing the *[Insert type of transportation provided]*, please tell us why:
- C-52** Please rate the quality of the information you received about the following while using the *[Insert type of transportation provided]*: *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-53** If you had not utilized the *[Insert type of transportation provided]*, which of the following modes of transportation best describes how you would have traveled?
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-54** Would you utilize the *[Insert type of transportation provided]* again?
 - Yes *[If yes, prompt them to explain reason why they would ride the shuttle again]*
 - No *[If no, prompt for reasons why they would not ride the shuttle again]*
- C-55** Which of the following would encourage you to take the *[Insert type of transportation provided]* provided by *[Insert Federal property name]*? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-56** Why did you choose to use the *[Insert type of transportation provided]* today (or on your most recent visit) provided by the *[Insert Federal property name]*? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-57** Where did you first board the *[Insert type of transportation provided]* service today? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- C-58** Please rate the usefulness of the *[Insert type of transportation provided]* provided by the *[Insert Federal property name]*: *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*

- C-59** What is the likelihood you will use the *[Insert type of transportation provided]* again? (Select one) *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely nor Unlikely, Somewhat Likely, Extremely Likely]*
- C-60** Which of the following best describes how often you use public transportation at home? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
 - Never
- C-61** How would you describe the frequency of your visits to *[Insert Federal property name]*? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- C-62** Did you use a GPS for any of the following? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- C-63** While visiting *[Insert Federal property name]*, did you carry any of the following electronic devices with you? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
 - I do not typically carry portable electronic devices
- C-64** Do you belong to an organized *[Insert group type]* group (e.g., ATV, 4-wheel, etc.)?
- Yes
 - No
- C-65** How likely are you to do the following while riding your *[insert equipment type]* in *[Insert Federal property name]*?
- *[Insert drop down selections]*
- C-66** How true do you find the following statements about riding your *[insert equipment type]* in *[Insert Federal property name]*? *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely nor Unlikely, Somewhat Likely, Extremely Likely]*
- *[Insert drop down selections]*
- C-67** To what extent would you be in favor of registering or getting a permit for your *[insert equipment type]* if it meant better maintenance and infrastructure (e.g., bridges)?

Experiences, Preferences, and Perceptions

- D-1** Do you think raising community awareness about the presence of the *[Insert Federal property name]* and what it has to offer would increase engagement?
- Yes
 - No
- D-2** Do you think increasing programming would help to encourage visitation at the *[Insert Federal property name]*?
- Yes
 - No
- D-3** What amenities or facilities would you like to see improved and/or developed at the *[Insert Federal property name]* to better engage your community? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- D-4** Based on your experience, how likely do you think increasing *[Insert program name]* (e.g., school programs) would make members of your community more likely to visit the *[Insert Federal property name]* in their free time? *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely or Unlikely, Somewhat Likely, Extremely Likely]*
- D-5** In general, how would you rate your interactions with the *[Insert bureau/office]* staff? *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*
- D-6** Please rate the quality of the indoor facilities (exhibits, classrooms, restrooms, etc.)? *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*
- D-7** Please rate the quality of the below listed outdoor facilities (signs, trails, kiosks, roads, etc.)? *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*
- *[Insert drop down selections]*
- D-8** What did you enjoy most about your visit?
- D-9** What did you enjoy least about your visit?
- D-10** After visiting, how likely are you to do the following? (Select one) *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely or Unlikely, Somewhat Likely, Extremely Likely]*
- *[Insert drop down selections]*

Knowledge, Attitudes, and Beliefs

- E-1** Of the *[Insert topic]* issues below, which are you the most concerned about? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-2** Which of the following do you feel are not being monitored appropriately and should be expanded? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-3** What are the primary modeling and prediction gaps in *[Insert topic]* at the *[Insert location]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-4** Which quantity, quality, and use assessments are most needed for the *[Insert topic]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-5** What currently motivates your community members to engage in outdoor recreation? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-6** What are some common forms of outdoor recreation activities among members of your community (e.g., fishing, sports, social activities)? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-7** What currently motivates your community to visit *[Insert Federal property name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-8** Which actions listed below do you feel can should take to better engage the local community at *[Insert Federal property name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-9** How familiar are you with the purposes and characteristics of *[Insert Federal property name]*? (Select one) *[Use 5-point scale: Not at all Familiar, Slightly Familiar, Somewhat Familiar, Very Familiar]*
- E-10** Please indicate your level of agreement with the following statements about your use of *[Insert Federal property name]*. (Select one box for each item) *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert drop down selections]*
 - Other (Please specify)
- E-11** Please rate how IMPORTANT each topic is to your work in the context of *[Insert program name/purpose]*. Please provide a response for all items, using the response table below. *[Use 5-point scale: Not Considered (not important at all), Minimally Important (Little consideration; only as an ancillary topic), Moderately Important (Somewhat considered in my work), Important (Highly considered in my work), Critically Important (Foundational to determining decisions in my work)]*
- *[Insert drop down selections]*
 - Other (Please specify)
- E-12** Please select up to *[#]* science topics that are most relevant to your work. (Select up to *[#]* topics)
- *[Insert drop down selections]*
 - Other (Please specify)

- E-13** How FUNCTIONAL are the scientific resources for *[Insert topic]* listed below in the context of *[Insert program name/purpose]* related decision making? Please consider the availability and quality of data, tools, or programs used to guide resource management decisions. *[Use 5-point scale: Not at all (Not well-developed at all; not functional), Minimal (Very limited in scope, scale, or function), Moderate (Generally functional with notable insufficiencies or limitations), Good (Good; gaps may exist for minor elements), Robust (Robust; well developed and highly functional)]*
- *[Insert drop down selections]*
 - Other (Please specify)
- E-14** How RELIANT are you on scientific products and resources about *[Insert topic]* from the following sources in the context of *[Insert program name/purpose]* related decision making? *[Use 5-point scale: No Reliance (I do not use information from this source for my work), Minimal Reliance (I use information from this source, but it would have little effect on my work if the source did not provide it), Moderate Reliance (My work would still be possible but somewhat more difficult without the information provided by this source), Heavy Reliance (My work would still be possible but a lot more difficult without the information provided by this source), Complete Reliance (My work would not be possible without the information provided by this source)]*
- *[Insert drop down selections]*
 - Other (Please specify)
- E-15** From which of the following *[Insert name/system]* do you gather scientific products and resources for *[Insert topic]* in the context of *[Insert program name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-16** How do you think the *[Insert bureau/office]* should prioritize objectives for the *[Insert program name]* over the next *[#]* years to best meet your needs? (Rank options from lowest to highest priorities)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-17** Please rate your level of experience in the context of *[Insert program name]*. (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-18** Have you heard of the *[Insert bureau/office]*, compared to other Federal and State organizations?
- Yes
 - No
- E-19** Are you familiar with the programs and events offered by the *[Insert bureau/office]*?
- Yes
 - No
- E-20** Based on my experience with the *[Insert bureau/office]* programs and staff, I have a solid understanding of what the programs can/cannot do and where/how they are applied in my *[Insert location/region]*.
- Yes
 - No
 - Please explain your answer
- E-21** Based on your opinion, please indicate your level of agreement with the following statements about *[Insert bureau/office]* staff: *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert drop down selections]*
- E-22** In my area of work, the most important conservation needs that require attention within the next *[#]* years are (Rank your top *[#]* answers in order of importance):
- *[Insert drop down selections]*
- E-23** Had you heard about the *[Insert specific bureau/office and/or program name]* program prior to taking this survey?
- Yes
 - No

- E-24** If yes, where did you hear about the program?
- *[Insert drop down selections]*
 - Other (Please specify)
- E-25** When considering your future goals for your property, which of the options below influence the projects you pursue or daily management decisions? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-26** Which of the following regarding wildlife conservation are important to you? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-27** Why did you decide to participate in this study? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-28** Would you participate in the *[Insert bureau/office]* program? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-29** Where are some places where you connect with your community? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-30** What types of community-based groups do you participate in? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- E-31** Do you like to be outside?
- Yes
 - No
- E-32** If you answered yes...What activities do you like to do outside? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)

Public, Stakeholder, and Partner Engagement

- F-1** Do you have any emerging needs or opportunities that you would like to partner with the *[Insert bureau/office]* on?
- Yes – If yes, please describe.
 - No
 - Unsure
- F-2** What are your desired outcomes for partnering with the *[Insert bureau/office]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-3** As we think about *[Insert topic area]* moving forward at the *[Insert bureau/office]*, which communities you work with/and or represent? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-4** Which of the following activities would help to reduce or remove barriers to the local community and/or underserved groups to encourage visitation to the *[Insert Federal property name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-5** Which of the following additional needs or barriers need to be broken down to connect the local community to the outdoors? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-6** In an effort to shape our services for urban audiences and become a better partner, which of the following should be implemented to improve access and opportunity for underrepresented populations with the outdoors, wildlife, and conservation? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-7** As we plan for future urban outreach and partnering capabilities, which of the following strategies or approaches would be useful to connect with new or underrepresented audiences or groups? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-8** As we evaluate partner satisfaction with our program administration, what are the best ways to contact and promote outdoor activities within your community (e.g., language barrier, communication styles, social media, direct contact)? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-9** Which outdoor programs or organizations should the *[Insert bureau/office]* consider partnering with to reach diverse audiences as we evaluate partner satisfaction with our program administration? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-10** Would you or your organization be willing to partner or continue partnering with the *[Insert bureau/office]* to conduct outreach and provide conservation programs?
- Yes *[If yes, prompt for explanation on how they envision their organization being involved]*
 - No
 - Unsure

- F-11** As we look [#] years ahead for planning purposes, how do you envision a successful partnership and collaboration between the *[Insert bureau/office]* and your organization to serve diverse communities? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-12** What other issues or topics should we consider as we address our urban outreach planning that would be beneficial to growing a confident, competent, and diverse outdoor-minded community?
- *[Insert drop down selections]*
 - Other (Please specify)
- F-13** Please indicate which of the following conservation related agencies or organizations (e.g., U.S. Fish and Wildlife Service, Soil and Water Conservation District, Iowa Natural Heritage Foundation, etc.) with whom you a personal or professional contact?
- *[Insert drop down selections]*
 - Other (Please specify)
- F-14** Do you know other people that have participated in *[Insert program name/topic]* programs?
- Yes
 - No
- F-15** Who are the important people, places, or communities where you can discuss land management? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-16** Where do you learn or talk about land management issues? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- F-17** Which organizations or agencies do you look to for land management information or opportunities? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)

Program Evaluation and Planning

- G-1** Type of Program
- *[Insert drop down selections]*
- G-2** Overall, what is your satisfaction with the *[Insert program name]* Program? *[Use 5-point scale: Extremely Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Extremely Satisfied]*
- G-3** What other programs or resources should the *[Insert Federal property name]* should offer?
- *[Insert drop down selections]*
- Other (Please specify)
- G-4** What is the best way for you to interact with outdoor programs hosted by organizations such as yours (during non-COVID times)?
- *[Insert drop down selections]*
- Other (Please specify)
- G-5** What do you think is the best way to connect youth to conservation ideas and career tracks?
- *[Insert drop down selections]*
- Other (Please specify)
- G-6** Would you be willing to help and/or partner with the *[Insert bureau/office]* on the development of programs and events?
- Yes
- No
- If yes (Please specify)
- G-7** If there was one thing about our programs that you could change, what would that be?
- G-8** Overall, how satisfied are you with the following aspects of the *[Insert program name]* program? *[Use 5-point scale: Extremely Dissatisfied, Slightly Dissatisfied, Neither Dissatisfied nor Satisfied, Slightly Satisfied, Extremely Satisfied]*
- *[Insert drop down selections]*
- G-9** Overall, how satisfied are you with your experience working with the *[Insert program name]* program? *[Use 5-point scale: Extremely Dissatisfied, Slightly Dissatisfied, Neither Dissatisfied nor Satisfied, Slightly Satisfied, Extremely Satisfied]*
- G-10** Please select the top *[#]* challenges or barriers that may prevent you from participating in a *[Insert program name]* program (select *[#]* challenges or barriers):
- *[Insert drop down selections]*
- Other (Please specify)
- G-11** Please select the top *[#]* reasons you choose to participate in conservation, generally? (Select top *[#]* reasons)
- *[Insert drop down selections]*
- Other (Please specify)
- G-12** Please rank the following reasons you choose to participate in *[Insert program name]* programs? (Rank “1” as most important and “*[#-#]*” as least important)
- *[Insert drop down selections]*
- G-13** Were there any challenges or obstacles in coordinating or initiating your *[Insert program name]* project? (Select all that apply)
- *[Insert drop down selections]*
- Other (Please specify)
- G-14** Would you recommend any changes to the *[Insert program name]* process?
- G-15** What other *[Insert program name]* programs have you participated in (or might consider participating in)?
- *[Insert drop down selections]*
- G-16** Which *[Insert topic or program options]* are of greatest interest to you? (Select all that apply)
- *[Insert drop down selections]*

- Other (Please specify)
- G-17** Did the *[Insert document or program name]* engage your child in fun-filled activities?
 - Yes
 - No
 - Maybe
- G-18** Were the activities age appropriate?
 - Yes
 - No
 - Maybe
- G-19** Did your child find the activity instructions complicated or overwhelming?
 - Yes
 - No
 - Maybe
- G-20** Did the experience or activity enhance your visit to *[Insert Federal property name]*?
 - Yes
 - No
 - Maybe
- G-21** Did the activities help you to engage with your child during this visit?
 - Yes
 - No
 - Maybe
- G-22** Which parts of this *[Insert program document/activity]* did you find informative to you, another adult, or sibling as a shared learning experience? *[Provide options to multi-select self, other adult, or sibling for each activity listed]*
 - *[Insert drop down selections]*
- G-23** When your child's experience committed to the *[Insert program name/activity]* and received their *[Insert program item]*, was it a positive experience for them?
 - Yes
 - No
- G-24** Please rate the following activities/themes from most to least enjoyable for your child? *[Use 5-point scale: Very Enjoyable, Enjoyable, Neutral, Somewhat Enjoyable, Not at all Enjoyable]*
 - *[Insert drop down selections]*
- G-25** Did the *[Insert program document/activity]* help your family better understand the unique ecosystems of *[Insert Federal property name or geographic location]*?
 - Yes
 - No
 - Maybe
- G-26** How do you envision *[Insert program name]* growing over the next [#] years?
- G-27** How do you envision your level of commitment/involvement with *[Insert program name]* over the next [#] years?
- G-28** Based on your experience, please indicate your level of agreement with the following statements about the *[Insert bureau/office]* programs: *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- G-29** In general, how was your experience with the *[Insert bureau/office]* programs? *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*
- G-30** Have you participated in the *[Insert bureau/office]* program?
 - Yes
 - No
- G-31** Do you feel stakeholders generally support the work and goals of the *[Insert program name]*?

- Yes
 - No
 - Not sure
- G-32** Do you feel the *[Insert program name]* is a good partner?
- Yes
 - No
 - Not sure
- G-33** Do you feel State and Federal agencies work well together on *[Insert species]* in *[Insert region/location]*?
- Yes
 - No
 - Not sure
- G-34** Do you feel the *[Insert program name]* is well integrated into the larger *[Insert species/program]* community?
- Yes
 - No
 - Not sure
- G-35** Do you feel the *[Insert program name]* is relevant?
- Yes
 - No
 - Not sure
- G-36** Do you feel the *[Insert program name]* is sufficiently responsive to new or outside knowledge in changing or adjusting resource management issues, practices, and focus?
- Yes
 - No
 - Not sure
- G-37** Of the following, which are the top *[#]* management challenges must **your** organization address in the next *[#-#]* years? (Select your top # challenges)
- *[Insert drop down selections]*
 - Other (Please specify)
- G-38** Of the following, which are the top *[#]* emerging trends that will affect *[Insert species]* management? (Select *[#]* emerging trends)
- *[Insert drop down selections]*
 - Other (Please specify)
- G-39** Of the following, which are most important measures of progress and success when increasing partnerships and cooperation? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- G-40** Please rank the importance the following *[#-#]* items in your philosophy about *[Insert species]* conservation? (Rank “1” as most important and “*[#-#]*” as least important)
- *[Insert drop down selections]*

Training Evaluation

- G-41** Please rate the effectiveness of this training for each statement below: *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert individual statements for evaluation]*
- G-42** What did you like the most about the training? (Select all that apply)
- *[Insert drop down selections for training topic areas]*
 - Other (Please specify)
- G-43** What suggestions do you have to improve this training?

- G-44** What other *[Insert topic area]* training topics are of interest to you?
 - *[Insert drop down selections]*
- G-45** Which program/lesson did you attend?
 - *[Insert drop down selections]*
- G-46** What date did you attend the program?
- G-47** How did you hear about this program?
 - *[Insert drop down selections]*
 - Other (Please specify)
- G-48** Overall, did the program/lesson meet your expectations?
- G-49** Please rate the quality of the program/lesson. *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*
- G-50** What are *[#]* things you learned from participating in this program?
- G-51** What other information would you have liked to see covered in the program/lesson?
- G-52** Which topics are the most useful or memorable for the students? (Select all that apply)
 - *[Insert drop down selections for training topic areas]*
 - Other (Please specify)
- G-53** After today's program, how likely are you to do the following? *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely nor Unlikely, Somewhat Likely, Extremely Likely]*
 - *[Insert drop down selections]*
- G-54** Ease of finding contact information for requesting an education trip: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-55** Efficiency of corresponding with *[Insert staff position]* prior to trip: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-56** Did those interactions prepare you and group for your experience: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-57** Did your group learn valuable new information: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-58** How would you rate the overall quality of the program: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-59** How well did the program meet your learning objectives and expectations, as identified prior to your visit: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-60** Was your group engaged by the content of the program: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-61** Did the program content prompt inquiry and discussion at a later time: *[Use 5-point scale: 1 – Far below expectations 3 – Met Expectations 5 – Exceeded All Expectations]*
- G-62** Do you have any suggestions for improving the *[Insert program name]* program in the future?
- G-63** How likely are you to return to *[Insert Federal property name]*? How likely are you to recommend the *[Insert program name]* program to other educators?
- G-64** Do you prefer to attend the *[Insert meeting name]* in person or virtually via a series of webinars?
 - In-person
 - Virtually via webinar
- G-65** If you are interested in attending in-person, will your organization support your travel?
 - Yes
 - No
 - Not sure
- G-66** If the event was in-person, which location(s) would you prefer?
 - *[Insert drop down selections for location options]*
- G-67** Which time of year do you prefer for the symposium or webinar series?
 - *[Insert drop down selections]*
 - Other (Please specify)

- G-68** Of the following, which topics should be covered in the symposium/webinar?
- *[Insert drop down selections]*
 - Other (Please specify)
- G-69** Who should attend the symposium/webinar?
- *[Insert drop down selections]*
 - Other (Please specify)
- G-70** What would you most like to get out of the symposium/webinars?
- G-71** In your opinion, what is the single most important conservation challenge for *[Insert program/meeting name]*? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- G-72** What topics are you most interested in writing about or covering? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- G-73** What outdoor activities or interests do you enjoy? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- G-74** Which of the following topics are you most interested in learning more about?
- *[Insert drop down selections]*
 - Other (Please specify)
- G-75** Which course formats would you be interested in participating in:
- *[Insert drop down selections]*
 - Other (Please specify)
- G-76** Overall, how would you describe the value of this workshop/webinar to you personally? *[Use 5-point scale: Very Valuable, Valuable, Neutral, Somewhat Valuable, Not at All Valuable]*
- G-77** Overall, how would you describe the value of this workshop/webinar to your organization? *[Use 5-point scale: Very Valuable, Valuable, Neutral, Somewhat Valuable, Not at All Valuable]*
- G-78** If you indicated that the workshop/webinar was somewhat valuable, valuable, or very valuable to you and your organization, please briefly explain in what way(s) it was valuable.
- G-79** Please indicate your level of agreement with the following general statements about the information provided during the workshop/webinar. *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert drop down selections]*
- G-80** Please indicate your level of agreement with the following general statements to indicate the extent to which your knowledge about the following topics increased as a result of attending this workshop/webinar. *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert drop down selections]*
- G-81** Did the workshop/webinar raise new issues not yet considered within your organization?
- Yes. If yes, please explain:
 - No
 - Not applicable
- G-82** Do you intend to share information about the content presented in this workshop/webinar with others in your organization?
- Yes. If yes, please describe how you plan to do so:
 - No. If no, why not?
 - Not applicable

General Conservation

- H-1** My organization focuses on the following conservation initiatives: (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
 - Unsure
- H-2** I have worked with the following *[Insert bureau/office]* programs: (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
 - Unsure
- H-3** Would you like to have a follow-up conversation with *[Insert bureau/office]* program staff?
- Yes *[Insert additional contact options (e.g., address, phone, email, etc.)]*
 - No
- H-4** Please tell us about your current work with *[Insert bureau/office]* so that we can help improve our services.
- H-5** Do you own land in *[Insert geographic location]*?
- Yes
 - No
- H-6** What was the total cost of the conservation activities?
- H-7** How much of the total conservation cost was spent on the following (provide % breakdown, if known)?
- *[Insert drop down selections (e.g., labor, travel, materials purchase)]*
- H-8** Who conducted most of this conservation work (provide % breakdown, if known)?
- *[Insert drop down selections (e.g., respondent, agency staff, private contractor(s), non-governmental organization(s))]*
- H-9** What kind of materials were purchased (provide % breakdown, if known)?
- *[Insert drop down selections]*
- H-10** Please rate how important the following statements are for you when making land use and management decisions for conservation: *[Use 5-point scale: Not at all Important, Low Importance, Neutral, Moderately Important, Extremely Important]*
- *[Insert drop down selections]*
 - Other (Please specify)
- H-11** What other individuals or organizations do you recommend we contact regarding *[Insert resource type]* issues in the *[Insert geographic location]*?
- H-12** Which data and information would be most helpful to you?
- *[Insert drop down selections]*
 - Other (Please specify)
- H-13** What themes do you feel would be the most effective for the *[Insert bureau/office]* to communicate the purpose, value, and benefits of conservation to others? (Rank your top [#] answers in order of importance)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-14** What is the best way to share stories about the themes listed in the previous question? (Rank your top [#] answers in order of importance.)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-15** Where do you learn about wildlife conservation projects and programs?
- *[Insert drop down selections]*
 - Other (Please specify)
- H-16** Where did you learn about the *[Insert program name]* program?
- *[Insert drop down selections]*

- Other (Please specify)
- H-17** Instead of completing a project by yourself, why did you participate in the *[Insert program name]* program? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- H-18** To what extent do the following motivate you to participate in the *[Insert program name]* program? *[Use 5-point scale: Not at all Important, Low Importance, Neutral, Moderately Important, Extremely Important]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- H-19** Which of the following *[Insert program name]* programs would you be interested in participating in in the future?
 - *[Insert drop down selections]*
 - Other (Please specify)
- H-20** Please rate how important the following statements are for you when making *[Insert conservation type]* decisions: *[Use 5-point scale: Not at all Important, Low Importance, Neutral, Moderately Important, Extremely Important]*
 - *[Insert drop down selections]*
 - Other (Please specify)
- H-21** Are you involved in any of the below listed monitoring efforts? (Select all that apply)
 - *[Insert drop down selections]*
 - Other (Please specify)
- H-22** Independent of *[Insert program name]* programs, do you do *[Insert conservation type]* conservation on your property (e.g., new projects, invasive species/weed control, maintenance and monitoring of native landscapes, etc.)?
 - Yes
 - No
 - Unsure
- H-23** To what extent do you agree or disagree with the following statements regarding conservation? *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
 - *[Insert drop down selections]*
- H-24** Does *[Insert program name]* tie into your agency or organization's mission?
 - Yes
 - No
 - Unsure
- H-25** The *[Insert bureau/office]* programs currently focus conservation efforts on *[Insert conservation option]* (specifically *[Insert species/habitat option(s)]*). Should the programs expand their focus to include habitats throughout the entire watershed (thus supporting a broader suite of both terrestrial and aquatic species/habitats)?
 - Yes, expand focus to *[Insert conservation type]* scale
 - No, maintain *[Insert conservation type]* focus
 - Please explain your answer:
- H-26** I would (or have) benefit from receiving the following types of technical assistance (e.g., non-financial) from *[Insert bureau/office]* staff: (Rank your top [#] answers in order of importance)
 - *[Insert drop down selections]*
 - Other (Please specify)
- H-27** Have you participated in any *[Insert type]* conservation programs on your property?
 - Yes
 - No
 - Unsure

- H-28** Which *[Insert conservation type]* conservation program(s) have you participated in? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-29** Are there additional *[Insert conservation type]* conservation programs you have participated in on your property?
- Yes
 - No
 - Unsure
- H-30** If yes, which program(s) have you participated in? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-31** The *[Insert bureau/office/program/activity name]* currently focus conservation efforts on *[Insert conservation type(s)]*. Should the *[Insert bureau/office/program/activity name]* expand their focus to include *[Insert a broader suite of conservation types]*?
- Yes. If yes, please explain your answer.
 - No
 - Unsure
- H-32** In relation to *[Insert resource type]* and related resource use in the *[Insert geographic area]*, select up to *[#]* things that are MOST IMPORTANT to you.
- *[Insert drop down selections]*
 - Other (Please specify)
- H-33** How would you “rate” your agency’s (State, local, or Tribal, government/organization’s) concern about the degree to which *[Insert species]* are causing conflicts in your state? (Rank your top *[#]* answers in order of importance)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-34** Which of the following biological conflicts are *[Insert species]* causing conflicts in your state? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-35** Is your state experiencing direct economic loses that can be directly attributed to *[Insert species]*?
- Yes
 - No
- H-36** Which of the following non-lethal management actions have your agency employed in addressing *[Insert species]* conflicts in your state? (Select all that apply):
- *[Insert drop down selections]*
 - Other (Please specify)
- H-37** Which of the following lethal management actions have your agency employed in addressing *[Insert species]* conflicts in your state? (Select all that apply):
- *[Insert drop down selections]*
 - Other (Please specify)
- H-38** Has your agency attempted to balance competing values on *[Insert species]* management amongst *[Insert type of user, e.g., recreational user]*?
- Yes
 - No
- H-39** When you purchase souvenirs, goods, and other items, do you ask vendors where those items came from?
- Yes
 - No

- H-40** Would knowing that an item like jewelry, clothing, food, artwork, or a souvenir is made from an animal or plant increase, decrease, or have no impact on your chances of buying it?
 - Yes
 - No
- H-41** How likely or unlikely are you to pay attention to regulations relating to the kinds of souvenirs and goods you can bring home from your trip? *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely nor Unlikely, Somewhat Likely, Extremely Likely]*
- H-42** If you knew it would protect endangered animals and plants, how likely or unlikely would it be for you to ask questions about souvenirs and goods before buying them? *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely nor Unlikely, Somewhat Likely, Extremely Likely]*
- H-43** Do you feel like your personal actions can help protect wildlife?
 - Yes
 - No
- H-44** Did you know that *[Insert species]* are endangered?
 - Yes
 - No
- H-45** Do you know where to find information regarding whether a certain species is classified as endangered or threatened in your area (or where you are traveling)?
 - Yes
 - No
- H-46** Would knowing that an item is made from a *[Insert species]* increase, decrease, or have no impact on your chances of buying it?
 - Yes
 - No
- H-47** If you ask a vendor selling an item about the type of materials that were used to make a souvenir or good and they respond they are not sure or they do not know, would it increase, decrease, or have no impact on your chances of buying it?
 - Yes
 - No
- H-48** If you knew that an item could be potentially confiscated by law enforcement personnel or U.S. Customs, would it increase, decrease, or have no impact on your decision of buying it during your trip?
 - Yes
 - No
- H-49** What is the likelihood you would buy items during your trip that include depictions or actual parts of animals, local wildlife, and nature? *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely nor Unlikely, Somewhat Likely, Extremely Likely]*
- H-50** How often do you share or talk about what you know about nature with your **family**? (Select one) *[Use 5-point scale: More than once a week, About once a week, A few times a month, Less than once a month, Never]*
- H-51** How often do you share or talk about what you know about nature with your **friends**? (Select one) *[Use 5-point scale: More than once a week, About once a week, A few times a month, Less than once a month, Never]*
- H-52** In the future, how often do you share or talk about what you know about nature with your **family**? (Select one) *[Use 5-point scale: More than once a week, About once a week, A few times a month, Less than once a month, Never]*
- H-53** In the future, how often do you share or talk about what you know about nature with your **friends**? (Select one) *[Use 5-point scale: More than once a week, About once a week, A few times a month, Less than once a month, Never]*
- H-54** How much do you know about the **animals that live near you**? (Select one) *[Use 5-point scale: Nothing, Very little, Some, Quite a bit, I'm an expert]*

- H-55** How much do you know about **how to help the animals** that live near you? (Select one) *[Use 5-point scale: Nothing, Very little, Some, Quite a bit, I'm an expert]*
- H-56** Which organization is responsible for conserving wildlife and plants in your community? (Select all that apply)
- *[Insert drop down selections]*
- H-57** Which of the following is a description of *[Insert Federal property name]*? (Select one)
- *[Insert drop down selections]*
- H-58** How much do you enjoy exploring nature? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-59** How important is it to conserve natural resources? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-60** How important is it to protect animals? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-61** How important is it to protect habitats? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-62** How important is nature in your community? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-63** How much do you care about nature in your community? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-64** How important is *[Insert Federal property name]* in your community? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-65** How likely are you to volunteer to clean-up a habitat in your community? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-66** How likely are you to volunteer to plant a tree in your community? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-67** How likely are you to participate in a conservation project in your community? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-68** How interested are you in a career that involves some aspect of science? (Select one) *[Use 5-point scale: Not at All, Very Little, Some, Quite a Bit, Tremendously]*
- H-69** How aware are you that streams in *[Insert Federal property name or geographic area]* provide critical habitat for *[Insert species]*?
- H-70** What top priority (non-Threatened and Endangered) *[Insert species type]* species do you consider most in need of *[Insert type of conservation activity/service]*? (Please rank in priority order)
- *[Insert drop down selections]*
- Other (Please specify)
- H-71** Explain the rationale behind your rankings (i.e., how did you prioritize which species are most in need of these actions).
- H-72** What are the specific locations that the *[insert species]* should be *[Insert type of conservation activity/service]*?
- *[Insert drop down selections]*
- Other (Please specify)
- H-73** Which of the following are reasons you believe the species should be *[Insert type of conservation activity/service]* the specific locations you mentioned? (Select all that apply)
- *[Insert drop down selections]*
- Other (Please specify)
- H-74** What are the specific reasons why these sites are most suitable for these actions (site by site)? (Select all that apply)
- *[Insert drop down selections]*
- Other (Please specify)

- H-75** What type of studies, if any, need to be undertaken at these *[Insert site type]* sites to understand their suitability as *[Insert species type]* *[Insert type of conservation activity/service]* projects? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-76** What additional work is needed to ready these sites to *[Insert type of conservation activity/service]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-77** What existing conflicts or challenges at these sites should be resolved before a *[Insert species type]* *[Insert type of conservation activity/service]* should be undertaken?
- *[Insert drop down selections]*
 - Other (Please specify)
- H-78** Are there any native species (including *[Insert species type]*) that are already established at the *[Insert site type]* sites that could be positively or negatively affected by *[Insert type of conservation activity/service]* projects?
- *[Insert drop down selections]*
 - Other (Please specify)
- H-79** Are there any species (native or non-native) that are present on the site that could affect the success of *[Insert type of conservation activity/service]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- H-80** At the *[Insert site type]* site(s) you recommend, is there already an entity / manager identified that can provide the organizational infrastructure / budget / fundraising capacity to support a *[Insert type of conservation activity/service]* project in the long term (including annual maintenance costs)?
- *[Insert drop down selections]*
 - Other (Please specify)
- H-81** Do you have any *[Insert species type]* *[Insert type of conservation activity/service]* currently underway or planned, and/or any budget to do this work?
- Yes
 - No
- H-82** What are the estimated costs associated with the *[Insert species type]* *[Insert type of conservation activity/service]* projects? *[Use 5-point scale: <\$100k, \$100K-\$250K, \$250K-\$500K, \$500K-\$1M, \$1M+]*
- H-83** What do you see as your role or that of your organization with respect to *[insert type of conservation activity/service]* projects? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- H-84** Can you suggest any other *[Insert species type]* biologists/managers with whom we should speak about *[insert type of conservation activity/service]*?
- *[Insert drop down selections]*
 - Other (Please specify)

General Restoration

- I-1** Have you participated in any restoration work with *[Insert bureau/office/program]* on your land?
- Yes
 - No
 - Unsure
- I-2** Please tell us about your current restoration work with *[Insert bureau/office/program]*.
- I-3** What year(s) did the restoration work take place?
- I-4** What was the impetus for the restoration work?
- *[Insert drop down selections]*
 - Other (Please specify)
 - Unsure
- I-5** Are you involved in any of the below listed restoration efforts? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- I-6** Did your restoration work include removal of contaminants?
- Yes, list contaminant(s)
 - No
 - Unsure
- I-7** Did your restoration work involve closure of any orphan gas or oil well(s)?
- Yes
 - No
 - Unsure
- I-8** Did your restoration work include any clean energy development?
- Yes, *[Insert drop down selections, e.g., solar, wind, hydropower, geothermal]*
 - No
 - Unsure
- I-9** Did your restoration work include any wildfire risk management activities?
- Yes, *[Insert drop down selections]*
 - No
 - Unsure
- I-10** Did your restoration work include any fish passage?
- Yes, *[Insert drop down selections for species, activity types]*
 - No
 - Unsure
- I-11** Did your restoration work include any groundwater recharge, aquifer storage, or other water recovery projects?
- Yes, *[Insert drop down selections for activity types]*
 - No
 - Unsure
- I-12** Was your restoration work conducted on any Federally recognized Tribal forest land or rangeland?
- Yes, *[Insert drop down selections]*
 - No
 - Unsure
- I-13** Did your restoration work connect to other restoration projects? (Please explain your answer)
- Yes
 - No
 - Unsure
- I-14** Why is it important to restore this area? (Select all that apply)
- *[Insert drop down selections]*

- Other (Please specify)
- I-15** Describe the primary benefit(s) of this restoration work.
 - *[Insert drop down selections, e.g., habitats, species, recreation, heritage, Tribal cultural]*
 - Other (Please specify)
- I-16** Where is the restoration work located?
 - *[Insert drop down selections]*
 - Other (Please specify)
- I-17** Please describe the restoration work site (*i.e.*, size, ecological community, proximity to notable landmarks, cultural importance).
 - *[Insert drop down selections]*
 - Other (Please specify)
- I-18** Please list the implementing organization(s) and any partner(s) and describe the role of each of the contributors.
- I-19** Please describe the approach or methods used for this restoration work.
- I-20** What was the total cost of the restoration work?
- I-21** How much of the total restoration cost was spent on the following (provide % breakdown, if known)?
 - *[Insert drop down selections (e.g., labor, travel, materials purchase)]*
- I-22** Who conducted most of this restoration work (provide % breakdown, if known)?
 - *[Insert drop down selections (e.g., respondent, agency staff, private contractor(s), non-governmental organization(s))]*
- I-23** What kind of materials were purchased (provide % breakdown, if known)?
 - *[Insert drop down selections]*
- I-24** Do you own land in *[Insert geographic location]*?
 - Yes
 - No
- I-25** Please describe your property
- I-26** How do you use your property?
- I-27** Which data and information would be most helpful to you?
 - *[Insert drop down selections]*
 - Other (Please specify)
- I-28** What themes do you feel are most effective for the *[Insert bureau/office/program/activity name]* to communicate the purpose, value, and benefits of restoration to others? (Rank your top [#] answers in order of importance.)
 - *[Insert drop down selections]*
 - Other (Please specify)
- I-29** What is the best way to share stories about the themes listed in the previous question? (Rank your top [#] answers in order of importance.)
 - *[Insert drop down selections]*
 - Other (Please specify)
- I-30** Where do you learn about restoration projects and programs?
 - *[Insert drop down selections]*
 - Other (Please specify)
- I-31** Where did you learn about DOI's *[Insert bureau/office/program/activity name]*?
 - *[Insert drop down selections]*
 - Other (Please specify)
- I-32** Please rate how important the following statements are for you when making land use and management decisions for restoration: *[Use 5-point scale: Not at all Important, Slightly Important, Moderately Important, Very Important, Extremely Important]*
 - *[Insert drop down selections]*
 - Other (Please specify)

- I-33** Are you involved in any restoration monitoring efforts?
- Yes, *[Insert drop down selections]*
 - Other (Please specify)
 - Unsure
- I-34** Describe the resource and its association and significance to the *[Insert bureau/office/program/activity name]*.
- I-35** Independent of *[Insert bureau/office/program/activity name]*, do you conduct restoration activities on your property (e.g., new projects, invasive species/weed control, maintenance of existing projects, etc.)?
- Yes
 - No
 - Unsure
- I-36** Briefly describe your experience(s) with restoration on your property.
- I-37** To what extent do you agree or disagree with the following statements regarding restoration? *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert drop down selections]*
 - Other (Please specify)
- I-38** Does *[Insert bureau/office/program/activity name]* tie into your agency or organization's mission?
- Yes
 - No
 - Unsure
- I-39** The *[Insert bureau/office/program/activity name]* currently focus restoration efforts on *[Insert restoration type(s)]*. Should the *[Insert bureau/office/program/activity name]* expand their focus to include *[Insert a broader suite of restoration types]*?
- Yes. If yes, please explain your answer.
 - No
 - Unsure
- I-40** I have, or would, benefit from receiving the following types of technical assistance (e.g., non-financial) from *[Insert bureau/office/program/activity name]* staff. (Rank your top [#] answers in order of importance):
- *[Insert drop down selections]*
 - Other (Please specify)
- I-41** Have you participated in any *[Insert type]* restoration programs on your property?
- Yes
 - No
 - Unsure
- I-42** Which private lands restoration program(s) have you participated in? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- I-43** What additional restoration programs you have participated in on your property? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)

Hunting/Fishing Activities

- J-1** Do you have a *[Insert hunting or fishing]* license?
- Yes
- No
- J-2** At what age did you begin to *[Insert hunt or fish]*?
- J-3** How many years have you been hunting offshore or from a layout boat?
- J-4** How many days per week/year do you typically hunt offshore or from a layout boat?
- J-5** What opening date do you prefer for the *[Insert season type]* season?
- J-6** Would you prefer a split in the *[Insert season type]* season?
- Yes
- No
- J-7** If you would like a spit in the *[Insert season type]* season, how many days/weeks would you prefer the split to be?
- J-8** If you would like a split in the *[Insert season type]* season, when would you like that split to start?
- J-9** Would you be interested in a phone app to record your daily harvest and to provide you with season regulations, as well as seasonal harvest limits?
- Yes
- No
- J-10** Approximately how far, in miles or kilometers, do you travel from home to *[Insert hunt or fish]* on *[Insert Federal property name]*? _____ miles kilometers OR Don't know/not sure
- J-11** Species hunted/fished and number of each taken?
- *[Insert drop down selections]*
- Other (Please specify)
- J-12** Method of take?
- *[Insert drop down selections]*
- J-13** Date(s) of hunt?
- J-14** Please rate the quality of your *[Insert hunting/fishing]* experience on the *(Insert Federal property name)*? (Select one) *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*
- J-15** Have been *[Insert hunting/fishing]* before?
- *[Insert drop down selections]*
- Other (Please specify)
- J-16** If yes, what is your favorite thing about *[Insert hunting/fishing]*?
- J-17** If no, why haven't you gone *[Insert hunting/fishing]* before?
- J-18** Where did you go *[Insert hunting/fishing]* today?
- *[Insert drop down selections]*
- Other (Please specify)
- J-19** Do you think you can teach me or someone else how to *[Insert hunt/fish]*?
- Yes
- No
- Maybe
- J-20** What do you need to go *[Insert hunting/fishing]*?
- J-21** Do you or does someone in your family have *[Insert hunting/fishing]* gear at home?
- Yes
- No
- I don't know
- J-22** What are some regulations about *[Insert hunting/fishing]*?
- J-23** Why are there regulations about *[Insert hunting/fishing]*?
- J-24** List as many types of *[Insert species]* as you can that live here in *[Insert location]*?

- J-25** What is the state fish of *[Insert state]*?
- J-26** What is the state land animal of *[Insert state]*?
- J-27** List as many places as you can where we can go *[Insert hunting/fishing]* here in *[Insert location]*?
- J-28** Does anyone at your household go *[Insert hunting/fishing]*?
- Yes
 - No
- J-29** Do you eat *[Insert species]* at home?
- Yes
 - No
- J-30** How comfortable do you feel with *[Insert hunting/fishing]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- J-31** How excited are you to go *[Insert hunting/fishing]* today?
- *[Insert drop down selections]*
 - Other (Please specify)
- J-32** What was your favorite part about *[Insert hunting/fishing]* today?
- J-33** How many *[Insert species]* did you harvest today?
- *[Insert drop down selections]*
 - Other (Please specify)
- J-34** If you harvested at least one *[Insert species]* today... Do you know what type of *[Insert species]* you harvested?
- Yes
 - No
- J-35** If yes, what type of *[Insert species]* was it?
- J-36** What did you like about *[Insert hunting/fishing]*?
- J-37** What did you not like about *[Insert hunting/fishing]*?
- J-38** How comfortable do you feel with *[Insert hunting/fishing]* now?
- *[Insert drop down selections]*
 - Other (Please specify)
- J-39** What do *[Insert species]* need to live?
- J-40** Where do *[Insert species name]* live?
- J-41** Do you want to go *[Insert hunting/fishing]* again?
- *[Insert drop down selections]*
 - Other (Please specify)
- J-42** Do you think you could teach a friend who has never *[Insert hunted/fished]* before how to go *[Insert hunting/fishing]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- J-43** What was your least favorite part about today?
- J-44** What did you learn today about *[Insert species]* that you didn't know before?
- J-45** What was the name(s) of the person(s) or outfitter(s) who guided you?
- J-46** What were your top [#] purposes for coming to the *[Insert Federal property name]*?
- J-47** Please rate your level of agreement with the following statements regarding your *[Insert activity name]*.
[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]
- *[Insert individual statements for evaluation]*
- J-48** Please rate how satisfied you were with the following aspects of your trip. *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*
- *[Insert individual statements for evaluation]*
- J-49** How satisfied were you with the condition of the natural environment on the *[Insert Federal property name]*? *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*

- J-50** Thinking back to your top [#] purposes for coming to this *[Insert Federal property name]*, please rate your level of agreement with the following statements. (Select top [#] only) *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert individual statements for evaluation]*
- J-51** How satisfied were you with your trip overall? *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*
- J-52** Please rate your level of agreement with the following statements regarding your *[Insert activity name]*.
[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]
- *[Insert individual statements for evaluation]*
- J-53** What are the top [#] things the *[Insert type of activity/activity coordinator]* could have done to have made your experience better?
- J-54** What are the top [#] things the *[Insert Federal property name]* could have done to have made your experience better?

System Feedback

- K-1** This survey is intended for current users of the *[system name]*. Are you a current user of *[system name]*?
- Yes
 - No
- K-2** Immediately following an *[Insert incident type]* (either in your area or not), what is your first source of information:
- *[Insert drop down selections]*
 - Other (Please specify)
- K-3** The *[Insert bureau/office]* is very interested in learning more about how we can improve our tools and information for our users. Would you be willing to talk more with us or participate in usability studies?
- Yes
 - No
 - Maybe
- K-4** Which communication feature(s) would you like to see on the portal?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-5** Did you find what you were looking for on this webpage?
- Yes
 - No
- K-6** Please select the functions you typically use on the website: (Select all that apply).
- *[Insert drop down selections]*
 - Other (Please specify)
- K-7** What other *[Insert bureau/office]* applications do you use? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
 - None
- K-8** Other (Please specify)What other languages (besides English and Spanish) should *[system name]* include in its notifications?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-9** Please select your *[system name]* user role. (Select one)
- *[Insert drop down selections]*
 - Other (Specify)
- K-10** How do you use *[system name]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-11** How often do you use *[system name]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-12** Do you use *[system name]* in a personal or professional capacity? (Select all that apply) *[branch based on this answer]*
- *[Insert drop down selections]*
 - Other (Please specify)
- K-13** (Personal): You indicated that you use *[system name]* in a personal capacity. Which of the following options best describe the personal interest or issue you are seeking information about when using *[system name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)

- K-14** (Professional): You indicated that you use *[system name]* in a professional capacity, which option best describes your primary professional duties? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-15** (Personal): Which of the following options best describe the ways that you currently use *[system name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-16** (Both): Which of the following options best describe the ways that you currently use *[system name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-17** (Professional): Which of the following options best describe the ways that you currently use *[system name]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-18** (If Professional Selected): You indicated that you use *[system name]* and applications in a professional capacity, which of the following best describes the sector that you work in?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-19** Please provide your contact information so that we may reach you to let you know about upcoming opportunities to provide in-depth feedback about our web-based applications and tools or participate in usability testing.
- *[Insert drop down selections]*
 - Other (Please specify)
- K-20** What type of degree was the primary student mapper working towards while involved with this *[Insert system name]* project?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-21** Did the primary student mapper pursue a career in geoscience after being involved with this *[Insert system name]* project?
- Yes
 - No
 - Pursued a higher degree
- K-22** If you answered “Yes,” what *[Insert industry name]* industry did the primary student mapper go into? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-23** If you answered “Yes,” is the primary student mapper still employed in a *[Insert industry name]* industry?
- NA – did not answer “Yes”
 - Yes
 - No
 - Do not know
- K-24** If you answered “No,” what type of career did the primary student mapper pursue? (Fill in the “other” box with career field.)
- NA – did not answer “No”
 - Do not know
 - Other (Please specify)

- K-25** If you answered “[Insert drop down selections],” what type of degree did the primary student mapper pursue? (Select multiple fields –select degree type and “other” - enter degree discipline in the “other” box.)
- [Insert drop down selections]
 - Other (Please specify)
- K-26** Did the primary student mapper develop skills during the [Insert system name] project that are relevant to their career? (Can select multiple fields – if you selected “Yes”, please also select “other” and enter the most valuable skill learned in the text field.)
- Yes
 - No
 - Other (Please specify)
- K-27** Was the primary student mapper’s experience with [Insert system name] positive?
- Yes
 - No
- K-28** How do you use the data? (Optional) (Select all that apply)
- [Insert drop down selections]
 - Other (Please specify)
- K-29** Does your organization have other science information needs?
- Yes
 - No
 - Unsure
- K-30** If you responded “yes,” please describe these needs and their level of importance to your organization in the space below:
- K-31** Please select the [Insert network name] Network in which you are primarily based (i.e., live and/or work). See map below. [Insert map showing networks]
- K-32** Which of the following [Insert network name] do you participate in (e.g., attend webinars, participate in events, receive emails from)? (Select all that apply)
- [Insert drop down selections]
 - Other (Please specify)
- K-33** Which of the following best describes the scale of the data that you work with most often? (Select all that apply)
- [Insert drop down selections]
 - Other (Please specify)
- K-34** How would you prefer to access [Insert bureau/office] data?
- [Insert drop down selections]
 - Other (Please specify)
- K-35** Is the content from the [Insert system name] notification email sufficient?
- [Insert drop down selections]
 - Other (Please specify)
- K-36** Do you want to keep the option of defining your own custom profile region, where you draw your own shape on the map? (Select all that apply)
- [Insert drop down selections]
 - Other (Please specify)
- K-37** How would you prefer to receive [Insert type/subject] notifications?
- [Insert drop down selections]
 - Other (Please specify)
- K-38** Do you want to keep past [Insert type/subject] notification records?
- Yes
 - No
- K-39** How satisfied are you with [Insert system name]? (Select one) [Use 5-point scale: Extremely Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Extremely Satisfied]

- K-40** The *[Insert bureau/office]* is currently working to improve how we deliver *[Insert type]*-quality data. Of the following potential improvements, which are most important to you? *[Use 5-point scale: Not at all Important, Slightly Important, Moderately Important, Very Important, Extremely Important]*
- *[Insert drop down selections]*
- K-41** Are you interested in any of the following types of *[Insert type]*-quality data? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
 - Not Applicable
- K-42** Please rate the quality of the following suggested portal topics: *[Use 5-point scale: Very Poor, Somewhat Poor, Average, Good, Very Good]*
- *[Insert drop down selections]*
 - Other (Please specify)
- K-43** Are there any topics you'd like to see on the portal that have not already been mentioned? If so, please elaborate.
- K-44** Ideally, how often should the resources on the portal be updated? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-45** What would be the preferred tone/style of language for the portal? [e.g., formal, informal, use of indigenous words, etc.]
- *[Insert drop down selections]*
- K-46** Are there any additional features that should be incorporated into the portal? [e.g., collaborative documents, moderated breakout sessions during video calls, links to wildlife webcams, etc.]
- *[Insert drop down selections]*
- K-47** What type of images would you like to see on the portal? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-48** How do you envision the portal being utilized moving forward?
- K-49** How do you envision your level of commitment/involvement with the online portal over the next [#] years?
- K-50** What else can we do to improve this page?
- K-51** I did not find this page helpful because the content on the page: (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-52** The content that was unhelpful was: (Select all that apply)
- *[Insert drop down selections]*
 - All of the above
 - Other (Please specify)
- K-53** What else can we do to improve this page?
- K-54** I did not find the *[Insert system name]* helpful because: (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-55** How satisfied are you with *[Insert program name/program notification type]*? *[Use 5-point scale: Extremely Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Extremely Satisfied]*
- K-56** Is there anything you would like us to know about your current or desired use of *[Insert program/system name]*?
- K-57** Select which data interests you the most. (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-58** How satisfied are you with the *[Insert program/system name]*?
- *[Insert drop down selections]*

- K-59** Please rate your level of satisfaction with each of the following regarding this website: *[Use 5-point scale: Extremely Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Extremely Satisfied]*
- *[Insert drop down selections]*
- K-60** Please rate your preference for each of the following search methods:
- *[Insert drop down selections]*
- K-61** Please rate the likelihood that you would use the following features, if available on the website: *[Use 5-point scale: Extremely Unlikely, Somewhat Unlikely, Neither Likely or Unlikely, Somewhat Likely, Extremely Likely]*
- *[Insert drop down selections]*
- K-62** What, if any, additional data would you like to have available for a record on the website, either as search criteria or search results?
- K-63** What, if any, additional documents or record types would you like to have available on the website?
- K-64** If this application did not exist and you had to perform the same tasks manually what, in your opinion, would be the impact on your workload? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-65** If you have received *[Insert system name]* user support, how satisfied were you regarding each of the following: *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*
- *[Insert drop down selections]*
- K-66** Is there anything else that you would like us to know about your use of *[Insert bureau/office]* web-based tools and applications?
- K-67** Please select which group(s) the portal should be accessible to: (Select all that apply)
- *[Insert drop down selections]*
- K-68** What other partners/organizations should be granted permission to add resources on the portal? Please be as specific as possible.
- K-69** How can *[Insert system name]* be improved? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-70** On average, what is your current wait time in receiving *[Insert type]* notifications from *[Insert system name]*?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-71** Which of the following best describes the age of the data that you use most often? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- K-72** What type of mapping was involved in this *[Insert program/project name]* project?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-73** What type of geologic issue was this *[Insert program/project name]* project primarily relevant to?
- *[Insert drop down selections]*
 - Other (Please specify)
- K-74** Are you aware that the *[Insert system name]* website has a Technical Support Team, that you can submit your suggestions, comments, or questions via email?
- Yes
 - No
- K-75** This survey is intended for current users of the *[Insert system name]* often referred to as *[Insert system name acronym]*. Are you a current user of *[Insert system name acronym]*?
- Yes

- No
- K-76** How often do you use *[Insert system name acronym]*?
 - *[Insert drop down selections]*
- K-77** Do you use *[Insert system name acronym]* in a personal or professional capacity?
 - Yes
 - No
- K-78** You indicated that you use *[Insert system name acronym]* in a personal capacity. Which of the following options best describe the personal interest or issue you are seeking information about when using *[Insert system name acronym]*? (Select all that apply)
 - *[Insert drop down selections]*
- K-79** You indicated that you use *[Insert system name acronym]* in a professional capacity, which option best describes your primary professional duties? (Select one)
 - *[Insert drop down selections]*
- K-80** Which of the following options best describe the ways that you currently use *[Insert system name acronym]*? (Select all that apply)
 - *[Insert drop down selections]*
- K-81** How satisfied are you with *[Insert system name acronym]*? *[Use 5-point scale: Very Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Very Satisfied]*
- K-82** Which of the following best describes the scale of the data that you work with most often? (Select all that apply)
 - *[Insert drop down selections]*
- K-83** Which of the following best describes the age of the data that you use most often? (Select all that apply)
 - *[Insert drop down selections]*
- K-84** The *[Insert bureau/office]* is very interested in learning more about how we can improve our tools and information for our users. Would you be willing to talk more with us or participate in usability studies?
 - Yes
 - No

Incident Response

- L-1** Please select the primary role in *[Insert incident type]* that best describes your work. If you do not work in *[Insert incident type]*, please consider your relevant experience for this question and the remainder of the survey.
- *[Insert drop down selections]*
 - Other (Please specify)
- L-2** Which of the following best describes the scope of your work? (Select one)
- *[Insert drop down selections]*
 - Other (Please specify)
- L-3** Which of the following examples of incident response do you have experience with protecting cultural or natural resources? (Select all that apply) *[e.g., oil spills, fires, flooding, etc.]*
- *[Insert drop down selections]*
 - Other (Please specify)
- L-4** If you answered yes to question above, please indicate how many incidents as this will help us tailor any training to your experience level.
- L-5** If you answered yes to the question above, please tell us the names and locations of the incidents you responded to and your role. If you have extensive experience, please list your *[#-#]* most recent or intensive incidents. This information will help us tailor any training to your experience level. Please be brief: name of incident, location, role.
- L-6** If you answered yes to the question above, would you be interested in contributing to a case study or discussion in either an in-person workshop or in an online webinar?
- Yes
 - No
- L-7** Have you been or are you currently involved in *[Insert incident type]* response planning?
- Yes
 - No
- L-8** Please indicate below what aspects of *[Insert incident type]* response planning you are or have been involved in. (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- L-9** Do you have incident management experience outside of *[Insert incident type]*? (Select all that apply)
- *[Insert drop down selections]*
 - Other (Please specify)
- L-10** Based on the map shown below, the region in *[Insert location]* where my organization primarily works is:
- *[Insert drop down selections]*

Miscellaneous

- M-1** Property - Listed in the National Register of Historic Places?
- Yes
- No
- Not a property
- M-2** Facility type
- *[Insert drop down selections]*
- Other (Please specify)
- M-3** Has the resource received a *[Insert bureau/office]* *[Insert grant name]* grant in the past?
- Yes
- No
- M-4** Additional data or comments.
- M-5** General Comments
- M-6** List any other comments or questions you might have below.
- M-7** Please use this space to provide feedback on anything we may have missed.
- M-8** Attach optional files of photos, brochures, or other materials to further illustrate the resource
- M-9** What is the ID number of your permit? (enter your permit ID, which may contain both numbers and letters)
- M-10** Please indicate your agreement with the following statement *[Insert statement]*: *[Use 5-point scale: Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree]*
- *[Insert drop down selections]*
- Other (Please specify)
- M-11** I would participate in this study again if I had the chance.
- Yes
- No
- M-12** Do you give the *[Insert bureau/office]* permission to follow-up with you based on your responses to this survey? This is optional and not required.
- Yes *[Insert additional contact options (e.g., phone, email, text, etc.)]*
- No
- M-13** Please indicate below the locations at which you own fractional interests and ACCEPTED all or some part of the purchase offer provided by the Buy-Back Program:
- *[Insert drop down selections]*
- M-14** Please indicate below the locations at which you own fractional interests and DID NOT ACCEPT any part of the purchase offer provided by the Buy-Back Program:
- *[Insert drop down selections]*
- M-15** If you chose to SELL any of your land interests, please identify the reasons why you chose to sell (Select all that apply):
- *[Insert drop down selections]*
- M-15** If you chose NOT to sell some or all of your land interests, please identify below the reasons why you chose NOT to sell (Select all that apply):
- *[Insert drop down selections]*
- M-16** Before receiving your purchase offer, how familiar were you with the Buy-Back Program? *[Use 4-point scale: Not at All Familiar, Slightly Familiar, Somewhat Familiar, Very Familiar]*
- M-17** From which sources did you receive information about Buy-Back Program? Select all that apply AND rate your satisfaction with their usefulness: *[Use 5-point scale: Extremely Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Extremely Satisfied]*
- *[Insert drop down selections]*

- M-18** How satisfied were you with the following aspects of the Land Buy-Back Program? (Select one) *[Use 5-point scale: Extremely Dissatisfied, Somewhat Dissatisfied, Neutral, Somewhat Satisfied, Extremely Satisfied]*
- *[Insert drop down selections]*