

National Capital Area Visitor Survey

[Park Site Name Here]

2021

PAPERWORK REDUCTION and PRIVACY ACT STATEMENT: The Paperwork Reduction Act requires us to tell you why we are collecting this information, how we will use it, and whether or not you have to respond. We are authorized by the National Park Service Protection Interpretation and Research in System (54 USC §100702) to collect this information. The routine uses of this information will be for the benefit of NPS Managers and Planning staff at the Chesapeake and Ohio Canal National Historical Park (CHOH) in future initiatives related to the visitor use within the park. The data collected will be summarized to evaluate visitor uses and expectations during their visit at CHOH. Your responses to this collection are completely voluntary and will remain anonymous. You can end the process at any time and will not be penalized in any way for choosing to do so. Your participation poses only minimal risks. Data collected will only be reported in aggregates and no individually identifiable responses will be reported. A Federal agency may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a currently valid OMB Control Number (1024-0224).

BURDEN STATEMENT: The average time is 12 minutes to complete and return this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection to: Dr. Chris Zajchowski, Assistant Professor, czajchow@odu.edu; or Phadrea Ponds NPS Information Collection Clearance Officer at pponds@nps.gov.

SECTION 1: YOUR PAST USE OF [Park Site Name Here]

1. Please tell us about your past visitation to **[Park Site Name Here]**
 - a. How many **days in the last month** (30 days) have you visited the park? _____
 - b. How many **days in the last year** (12 months) have you visited the park? _____
 - c. How many **years** (total) have you visited the park? _____

2. On your most recent visit, how long did you and your personal group spend visiting **[Park Site Name Here]**? Please list partial hours / days as ¼, ½, ¾.

_____ Number of hours, if fewer than 24 hours
OR

_____ Number of days, if 24 hours or more

- On your most recent visit, **[Park Site Name Here]** was the primary destination
- On your most recent visit, **[Park Site Name Here]** was one of several destinations
- On your most recent visit, **[Park Site Name Here]** was not a planned destination

3. On your most recent visit to **[Park Site Name Here]**, which of the following sites did you and your personal group visit? **Please mark all that apply.**

Specific park site areas listed here

4. On your most recent visit, what kind of personal group (not guided tour/school group) were you with? Please mark **only one.**

- Alone
- Family
- Friends
- Friends and family
- Other (please specify) _____

SECTION 2: YOUR MOTIVATIONS AND ACTIVITIES

5. On your most recent visit, what was the primary reason that you and your personal group visited **[Park Site Name Here]**? Please mark **one.**

- Business
- Passing through – unplanned visit
- To recreate
- To visit **[Park Site Name Here]**
- To visit other NPS site
- To visit other area attractions
- To visit friend/relative in the area
- Other (please specify) _____

Note to Reviewers: The list of activities in Q 5-generally occur in the parks of the National Capital Region. The surveys in each location will be adapted to be park/site specific.

6. Which activities have you and your personal group participated in within [Park Site Name Here]? Please mark **all** that apply.

<input type="checkbox"/> Attended ranger-led programs	<input type="checkbox"/> Hiking
<input type="checkbox"/> Auto-tour	<input type="checkbox"/> Learn about historic events
<input type="checkbox"/> Bird watching	<input type="checkbox"/> Photography/videos
<input type="checkbox"/> Camping	<input type="checkbox"/> Picnicking
<input type="checkbox"/> Dog walking	<input type="checkbox"/> Walking
<input type="checkbox"/> Enjoy nature	<input type="checkbox"/> Scenic driving
<input type="checkbox"/> Enjoy history	<input type="checkbox"/> Star gazing
<input type="checkbox"/> Fishing	<input type="checkbox"/> Other (Please specify)

Which one of the above activities is the primary activity in which you and your personal group have participated in at [Park Site Name Here]?

SECTION 3: YOUR RECREATION PREFERENCES

- 7. a. Please mark **all** the **services and facilities** that you and your personal group **used** during your most recent visit to [Park Site Name Here].
- b. Next, for only those services and facilities you and your personal group **used**, please rate their importance from 1-5.
- c. Finally, for only those services and facilities that you and your personal group **used**, please rate their quality from 1-5.

Service / facility used	If used, how important? 1 = Not at all important 2 = Slightly important 3 = Moderately important 4 = Very important 5 = Extremely important	If used, what quality? 1 = Very poor 2 = Poor 3 = Average 4 = Good 5 = Very good
<input type="checkbox"/> No services/facilities used -	skip to next question	
<input type="checkbox"/> Ballfield	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Restrooms	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Picnic area	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Parking lot	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Carter Barron Amphitheater	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Hiking trails (Paved)	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Hiking trails (Natural)	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Signage	1 2 3 4 5	1 2 3 4 5

8.

9. a. Please mark **all** the **public education resources** that you and your personal group **used** during your most recent visit to **[Park Site Name Here]**.
 b. Next, for only those public education resources you and your personal group **used**, please rate their importance from 1-5.
 c. Finally, for only those public education resources that you and your personal group **used**, please rate their quality from 1-5.

Public Education Resources	If used, how important? 1 = Not at all important 2 = Slightly important 3 = Moderately important 4 = Very important 5 = Extremely important	If used, what quality? 1 = Very poor 2 = Poor 3 = Average 4 = Good 5 = Very good
<input type="checkbox"/> No public education resources used	skip to next question	
<input type="checkbox"/> Nature center	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Outdoor history and culture exhibits	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Outdoor ecology exhibits	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Nature center exhibits	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Bulletin boards	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> In person ranger led programs	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Virtual ranger led programs	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Astronomy programs	1 2 3 4 5	1 2 3 4 5
<input type="checkbox"/> Planetarium	1 2 3 4 5	1 2 3 4 5

SECTION 4: INFORMATION AND AWARENESS

10. Prior to your visit, were you aware that **[Park Site Name Here]** is managed by the National Park Service (NPS)?

- Yes No Not sure

11. a. Would you or any member of your personal group prefer to receive information about **[Park Site Name Here]** in languages other than English?

- Yes No

b) If YES, which language(s)? _____

SECTION 5: ABOUT YOU

12. Do you live in the United States? (please check one and fill in the appropriate blank)

- a. Yes (what is your zip code? _____)
 b. No (what is your country of origin? _____)

13. What year were you born? _____

14. What is your gender? (select one)

- Male
- Female

15. What is the highest level of school you have completed? *(select one)*

- Less than high school
- Some high school
- High school graduate
- Some college
- Graduate or professional degree
- Two-year college graduate
- Do not wish to answer
- Four-year college graduate

16. For you only, are you Hispanic or Latino?

- Yes
- No

17. Which of these categories best indicates your race? Answer only for yourself. Please select **one or more**. *(select all that apply)*

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- Other (please specify) _____

18. Which category best represents your annual household income? **Please mark only one.**

<input type="checkbox"/> Less than \$24,999	<input type="checkbox"/> \$50,000 to \$74,999	<input type="checkbox"/> \$150,000 to \$199,999
<input type="checkbox"/> \$25,000 to \$34,999	<input type="checkbox"/> \$75,000 to \$99,999	<input type="checkbox"/> \$200,000 or more
<input type="checkbox"/> \$35,000 to \$49,999	<input type="checkbox"/> \$100,000 to \$149,999	<input type="checkbox"/> Do not wish to answer

19. Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

- Never served in the military
- Only on active duty for training in the Reserves or National Guard
- Now on active duty
- On active duty in the past, but not now

20. Is there anything else you would like to add related to your experience and the management of **[Park Site Name Here]**? Please share below.