

Joshua Tree National Park Management Survey 2025



To be completed by field staff:

ID _____ Time _____ Location _____ Date _____
Field staff _____

PRIVACY ACT and PAPERWORK REDUCTION 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 in North Cascades National Park in future initiatives related to the visitor use and resource management within the site. The data collected will be summarized to evaluate visitor uses and expectations during their visit at North Cascades National Park. 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. All contact information collected for the purpose of the follow-up survey will be destroyed at the end of the collection period and no personal identifiable records will be maintained or stored for any purposes. 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 ESTIMATE STATEMENT: We estimate that it will take about 10 minutes to complete this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection to: Megan McBride, National Park Service, megan_mcbride@nps.gov (email).

NOTE: In this questionnaire, “personal group” is defined as anyone that you are visiting the park with, such as spouse, family, friends, etc. This does not include the larger group that you might be traveling with, such as school, church, scouts, or tour group.

TOPIC AREA 3: CVIS3; CVIS2; CVIS1

(Variation: Expanded questions to obtain information about seasonal visitation and site-specific visitation)

1. Please tell us about your past visitation to Joshua Tree National Park (referred to as “the park” in the survey).

a. Including today, how many days in the last month (30 days) have you visited the park?

b. Including today, how many days in the last year (12 months) have you visited the park?

c. Including today, how many years (total) have you visited the park?

d. In what year did you first visit the park? (YYYY)

TOPIC AREA 3: DEST17

2. On this trip, how long did you and your personal group spend visiting Joshua Tree NP? Please list partial hours / days as $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$.

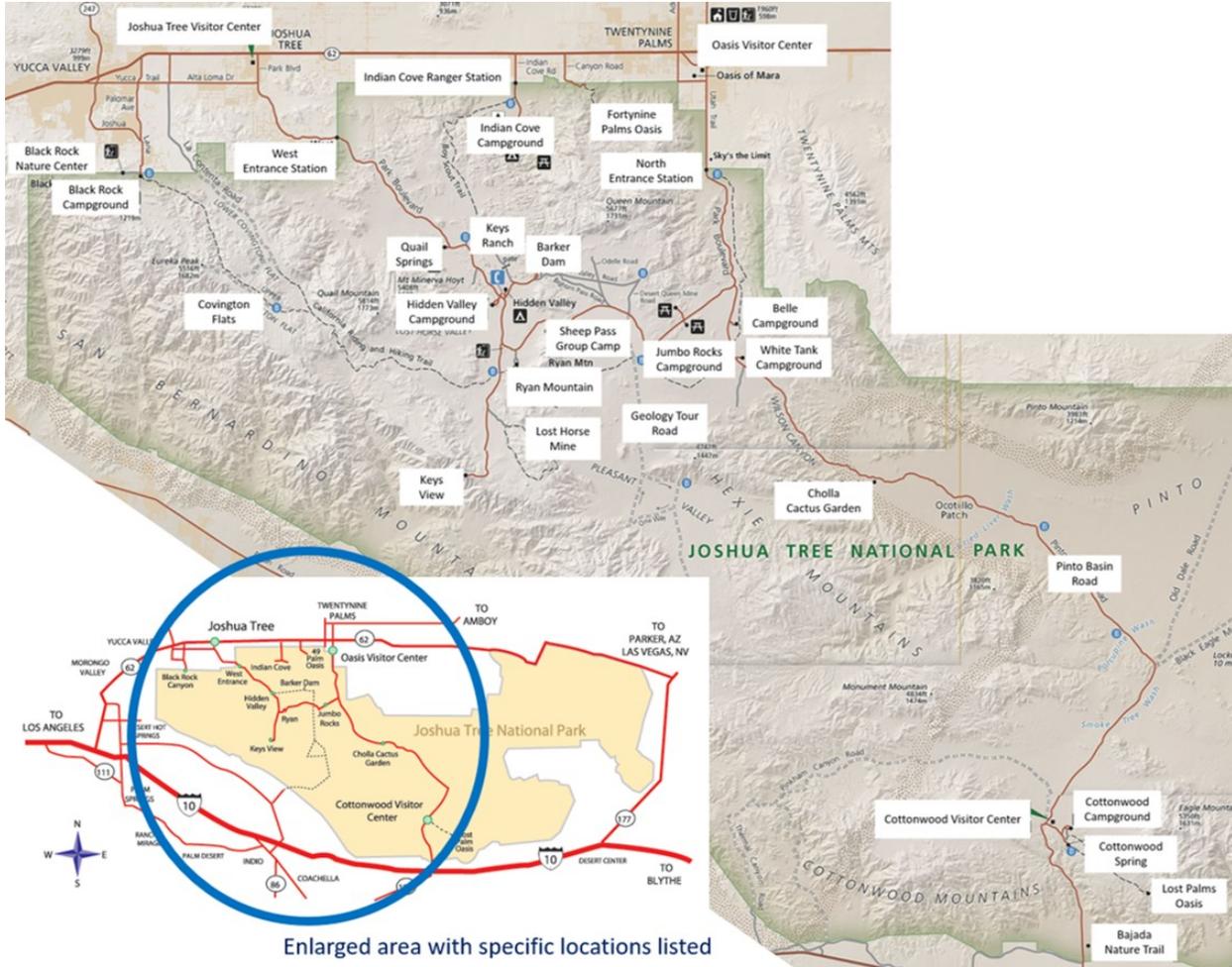
_____ Number of hours, **if fewer than 24 hours**

OR

_____ Number of days, **if 24 hours or more**

TOPIC AREA 3: CVIS8; DEST26

- On this visit to Joshua Tree NP, please select **all** the park locations that you and your personal group visited in Joshua Tree NP? *Select all white boxes with location names that apply.*



- Please list any other locations visited in the park on this trip.
-

TOPIC AREA 3: CVIS8, CVIS9

5. For this trip, where did you and your personal group spend the longest amount of time? *Please select only one location.*

- | | |
|---|--|
| <input type="checkbox"/> North Entrance Station | <input type="checkbox"/> Sheep Pass Group Camp |
| <input type="checkbox"/> West Entrance Station | <input type="checkbox"/> Bajada Nature Trail |
| <input type="checkbox"/> Indian Cove Ranger Station | <input type="checkbox"/> Barker Dam |
| <input type="checkbox"/> Cottonwood Visitor Center | <input type="checkbox"/> Cholla Cactus Garden |
| <input type="checkbox"/> Joshua Tree Visitor Center | <input type="checkbox"/> Cottonwood Spring |
| <input type="checkbox"/> Oasis Visitor Center | <input type="checkbox"/> Covington Flats |
| <input type="checkbox"/> Black Rock Nature Center | <input type="checkbox"/> Fortynine Palms Oasis |
| <input type="checkbox"/> Belle Campground | <input type="checkbox"/> Geology Tour Road |
| <input type="checkbox"/> Black Rock Campground | <input type="checkbox"/> Keys Ranch |
| <input type="checkbox"/> Cottonwood Campground | <input type="checkbox"/> Keys View |
| <input type="checkbox"/> Hidden Valley Campground | <input type="checkbox"/> Lost Horse Mine |
| <input type="checkbox"/> Indian Cove Campground | <input type="checkbox"/> Lost Palms Oasis |
| <input type="checkbox"/> Jumbo Rocks Campground | <input type="checkbox"/> Pinto Basin Road |
| <input type="checkbox"/> White Tank Campground | <input type="checkbox"/> Quail Springs |
| <input type="checkbox"/> Ryan Mountain | <input type="checkbox"/> Other _____ |

TOPIC AREA 5: ACT18c

6. On this visit, in which activities did you and your personal group participate within Joshua Tree NP? *Mark all that apply.*

- | | |
|--|---|
| <input type="checkbox"/> Attended field classes or other guided activities | <input type="checkbox"/> Picnicking |
| <input type="checkbox"/> Attended ranger-led programs | <input type="checkbox"/> Rock scrambling (without specialized gear or skills) |
| <input type="checkbox"/> Backpacking overnight | <input type="checkbox"/> Seeking spiritual connection |
| <input type="checkbox"/> Bicycling | <input type="checkbox"/> Sightseeing |
| <input type="checkbox"/> Bouldering (using pads and bouldering guides) | <input type="checkbox"/> Slacklining |
| <input type="checkbox"/> Camping | <input type="checkbox"/> Stargazing / viewing night sky |
| <input type="checkbox"/> Created content for social media / blogs | <input type="checkbox"/> Technical climbing (with specialized gear or skills) |
| <input type="checkbox"/> Day hiking | <input type="checkbox"/> Trail running |
| <input type="checkbox"/> Enjoyed nature | <input type="checkbox"/> Viewed plants and/or wildlife |
| <input type="checkbox"/> Exercised to promote physical fitness | <input type="checkbox"/> Visited historical or archaeological sites |
| <input type="checkbox"/> Family / friend gathering or celebration | <input type="checkbox"/> Visited visitor center(s) |
| <input type="checkbox"/> Horseback riding | <input type="checkbox"/> Walking self-guided nature trails (with brochures/signs) |
| <input type="checkbox"/> Photography / videos | <input type="checkbox"/> Other (Please specify) _____ |

TOPIC AREA 5: ACT18 (Variation: Focused on primary activity.)

7. Which one of the above activities was the primary activity in which you and your personal group participated at Joshua Tree NP on this visit? Please select one.

[item list will populate based on answers to Question #6]

TOPIC AREA 6: CROWD3

8. Please indicate if you changed any of the following during this visit or a previous visit to Joshua Tree NP because of too many people or crowding? *Select all that apply.*

	Changed during a previous visit to the park	Changed during this current visit to the park
Chose not to visit the park	<input type="checkbox"/>	-----
Changed the times of the day that you visited the park	<input type="checkbox"/>	<input type="checkbox"/>
Changed the dates or seasons that you visited the park	<input type="checkbox"/>	<input type="checkbox"/>
Chose not to visit your desired places at the park	<input type="checkbox"/>	<input type="checkbox"/>
Changed the times of day that you visited places at the park	<input type="checkbox"/>	<input type="checkbox"/>
Changed the order of places visited at the park	<input type="checkbox"/>	<input type="checkbox"/>
Chose not to participate in your desired activities at the park	<input type="checkbox"/>	<input type="checkbox"/>

TOPIC AREA 5a&b: ITIN15 (Variation: focused wording on campsite availability)

9. Have you ever changed your trip plans because a campsite in a particular campground at Joshua Tree NP was not available on the date you initially desired?

- Yes No
- Not applicable - I did not plan to camp

10. Please tell us how you changed your trip plans. *Select all that apply.*

- I changed the dates of my trip
- I camped at another location within Joshua Tree NP
- I camped at a location other than Joshua Tree NP
- I came to Joshua Tree NP but chose not to camp

TOPIC AREA 4: TRANSMGMT3

14. To what extent did the following factors impact your visit to Joshua Tree National Park? (Check one box for each statement)

	Level of Impact				
	Not at all	Very little	Somewhat	To a great extent	Not applicable
Too few parking spaces at pullouts and overlooks along scenic drives	<input type="checkbox"/>				
Too few parking spaces at trailheads	<input type="checkbox"/>				
Too few restrooms	<input type="checkbox"/>				
Congestion on park roads	<input type="checkbox"/>				
Too little directional signage on park trails	<input type="checkbox"/>				
Confusion about wilderness backpacking rules and regulations	<input type="checkbox"/>				
Confusion about camping rules and regulations	<input type="checkbox"/>				
Not enough ranger-led activities	<input type="checkbox"/>				
Congestion in the visitor centers	<input type="checkbox"/>				
Too little directional signage on the main park roads	<input type="checkbox"/>				
Vandalism (e.g., graffiti, tire tracks, illegal campfire scars)	<input type="checkbox"/>				
Limited information to plan your trip before you enter the park	<input type="checkbox"/>				
Too little signage on wilderness / backcountry trails in the park	<input type="checkbox"/>				
Too few informational signs	<input type="checkbox"/>				
Too few directional signs on trails	<input type="checkbox"/>				
Conflicts with other visitors on park roads or trails	<input type="checkbox"/>				

Topic Area 1: RES2

15. Are you a permanent resident or citizen of the United States?

- NO - What is your country of origin? _____
- YES - What is your zip code and state of your primary residence?
State _____ Zip code _____

Topic Area 1: AGE1

16. What is your age? _____

Topic Area 1: GEND1

17. What is your gender? (*select one*)

- Male
- Female
- Transgender, non-binary, or another gender
- Prefer not to answer

Topic Area 1: EDUC1

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

- | | |
|--|--|
| <input type="checkbox"/> Less than high school | <input type="checkbox"/> Two-year college graduate |
| <input type="checkbox"/> Some high school | <input type="checkbox"/> Four-year college graduate |
| <input type="checkbox"/> High school graduate | <input type="checkbox"/> Graduate or professional degree |
| <input type="checkbox"/> Some college | <input type="checkbox"/> Do not wish to answer |

Topic Area 1: ECON9

19. Which category best describes your total household income in U.S. dollars during 2024 before taxes? (*select 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 |

Topic Area 1: RACE/ETH2

20. What is your race and/or ethnicity? Select all that apply and enter additional details in the spaces below.

- American Indian or Alaska Native—Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.

- Asian—Provide details below.
 - Chinese
 - Vietnamese
 - Asian Indian
 - Korean
 - Filipino
 - Japanese

Enter, for example, Pakistani, Hmong, Afghan, etc.

- Black or African American—Provide details below.
 - African American
 - Nigerian
 - Jamaican
 - Ethiopian
 - Haitian
 - Somali

Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.

- Hispanic or Latino—Provide details below.
 - Mexican
 - Cuban
 - Puerto Rican
 - Dominican
 - Salvadoran
 - Guatemalan

Enter, for example, Colombian, Honduran, Spaniard, etc.

- Middle Eastern or North African—Provide details below.
 - Lebanese
 - Syrian
 - Iranian
 - Iraqi
 - Egyptian
 - Israeli

Enter, for example, Moroccan, Yemeni, Kurdish, etc.

- Native Hawaiian or Pacific Islander—Provide details below.
 - Native Hawaiian
 - Tongan
 - Samoan
 - Fijian
 - Chamorro
 - Marshallese

Enter, for example, Chuukese, Palauan, Tahitian, etc.

- White—Provide details below.
 - English
 - Italian
 - German
 - Polish
 - Irish
 - Scottish

Enter, for example, French, Swedish, Norwegian, etc.

OMB Number: XXXX-XXXX
Expiration Date: XX/XX/20XX

Thank you for your help with this survey!

Please click "next" to finalize your response.