

Social Science Program National Park Service U.S. Department of the Interior

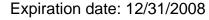
Visitor Services Project

Herbert Hoover National Historic Site

Visitor Study



OMB Approval 1024-0224 (NPS# 08-019)





United States Department of the Interior

NATIONAL PARK SERVICE Herbert Hoover National Historic Site P. O. Box 607 West Branch, IA 52358-0607

July-August 2008

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Herbert Hoover National Historic Site. This information will assist us in our efforts to better manage this park and to serve you, our visitor.

This questionnaire is only being given to a select number of visitors, so your participation is very important! It should only take about 20 minutes after your visit to complete.

When your visit is over, please complete this questionnaire. Seal it with the stickers provided on the last page and drop it in any U.S. mailbox.

If you have any questions, please contact Margaret Littlejohn, NPS VSP Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

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Sincerely,

Cheryl A. Schreier Superintendent

This visitor study is partially funded by Recreation Fee Program funding.

DIRECTIONS

At the end of your visit:

- 1) Please have the selected individual complete this questionnaire.
- 2) Answer the questions carefully since each question is different.
- 3) For questions that use circles (O), please mark your answer by filling in the circle with black or blue ink, or a pencil with dark (e.g. #2) lead.

Like this:

Not like this:

X

- 4) Seal it with the stickers provided.
- 5) Drop it in a U.S. mailbox.

Thank you!

PRIVACY ACT and PAPERWORK REDUCTION ACT statement:

16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. Your name is requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed. Thus the permanent data will be anonymous. Please do not put your name or that of any member of your personal group on the questionnaire. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Burden estimate statement: Public reporting burden for this form is estimated to average 20 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to Margaret Littlejohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.

Your Visit to Herbert Hoover National Historic Site

NOTE: In this questionnaire, your **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.

- a) Prior to your visit, how did you and your personal group get information about Herbert Hoover National Historic Site (NHS)? Please mark (●) all that apply in column a.
 - b) If you were to visit Herbert Hoover NHS in the future, how would you and your personal group prefer to obtain information about the park? Please mark (●) all that apply in **column b.**

<u>a) Prio</u>	r to this visit? (●)	b) On a future visit? (●)
0	Obtained no information prior to visit → Go to pa	rt b of this question
0	Previous visits	Ο
Ο	Friends/relatives/word of mouth	Ο
0	Travel guides/tour books (such as AAA, etc.)	Ο
0	Maps/brochures	Ο
Ο	Television/radio programs/DVDs	Ο
0	Newspaper/magazine articles/books	Ο
Ο	School class/educational program	Ο
Ο	E-mail/telephone/written inquiry to park	Ο
Ο	Park website: www.nps.gov/heho/	Ο
Ο	Herbert Hoover Presidential Library and Museum v www.hoover.archives.gov	vebsite: O
0	Other websites	0
0	State welcome center	0
0	Other historical parks/sites (Please specify below)	0
This vis	sit Future visit	
Ο	Local business/rest stop/gas station	0
Ο	Other (Please specify below)	0
This vis	sit Future visit	

	c) From the sources marked above, did you and your personal group receive the type of information about the park that you needed?								
	Ο	No ↓	Ο	Yes →	Go to 0	Question	2		
		O, what typ	oe of park info ble? Please be			and your p	oersona	ıl grou	up need that
2.	The National Park Service manages Herbert Hoover NHS. The National Archives and Records Administration manages the Presidential Library and Museum. Prior to this visit were you aware that two different federal agencies administer these sites? Please mark (●) one.								
	0	Yes, aw	vare sites were	e manag	jed by tw	o differen	t federa	al age	encies
	0	No, tho	ught both sites	were n	nanaged	by Natior	nal Park	Serv	rice
	O No, thought both sites were managed by National Archives and Records Administration								
	0	No, did	n't know who r	nanage	d either s	ite			
3.		trip to Her mark (●) c	bert Hoover N one	HS, hov	v did the	site fit int	o your t	ravel	plans?
	0	Herbert	Hoover NHS	was the	primary	destinatio	n		
	0	Herbert	Hoover NHS	was one	e of seve	ral destina	ations		
	0	Herbert	Hoover NHS	was not	a planne	ed destina	ation		
1.			the signs dire quate? Please		•	•	_	•	Herbert
a	a) Signs	on intersta	tes	0	Yes	Ο	No	0	Did not use
b	o) Signs	on state hi	ghways	0	Yes	0	No	0	Did not use
C	c) City st	reet signs	in communities	s O	Yes	Ο	No	0	Did not use
C	d) If you answered NO to any of the above, please explain.								

5.	a) On this visit, in which activities did you and your group expect to participate? Please mark (●) all that apply in column a.						
	b) In which activities did you and your group actually participate on this visit? Please mark (●) all that apply in column b.						
	a) Acti	ties on th	<u>is visit</u> (●)				
	0	Learning/researching history		Ο			
	Ο	Picnicking		0			
	0	Walking/hiking on trail		0			
	Ο	Attending ranger-led program		0			
	0		0				
	Ο		0				
	O Attending Library's special programO Obtaining National Park passport stamp			0			
				0			
	0	Attending Hoover Fest (Hoover Ball, craftwork, firew	vorks)	0			
	Ο	Attending summer activities (farmers market, conce	ert)	0			
	Ο	Painting/drawing/taking photographs		0			
	0	Other (Please specify below)		0			
Exp	ected	On this visit					
		s there anything that you and your personal group wa visit but were not able to?	anted to do	or see on			
	0	Yes O No → Go to Question 6					
	d) If YE	↓ ES, what was it? Please be specific.					
	e) Why	weren't you able to see or do what you wanted to?	Please be	specific.			

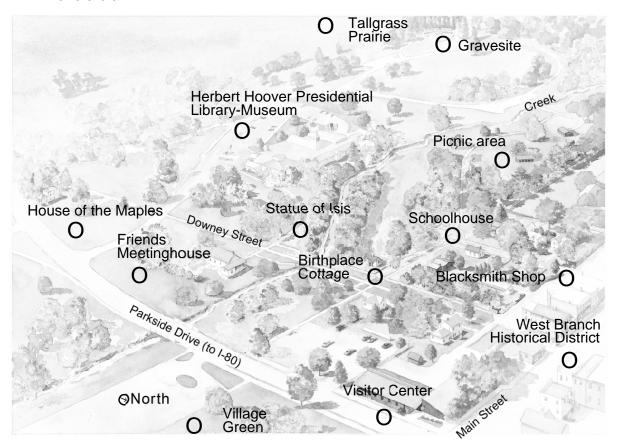
6.	a)		nis visit to Herbert Hoover NHS ark on more than one day?	s, dic	d you a	and your p	personal gro	up visit			
		0	Yes ↓		Ο	No J					
	b)		S, on how many days did sit Herbert Hoover NHS?	c)			ny hours did pover NHS?	you			
			_ Number of days			_ Numbe	r of hours				
	(Please	e list partial days/hours as 1/4,	1/2,	or 3/4	, e.g. ¼ hr	r, 1 ½ hrs, 5 ¾	¼ hrs)			
	d)		pared with what you had plann o spend visiting Herbert Hoove								
		0	Did not have a planned am	oun	t of tim	ne					
		0	Spent longer time than plar	nnec	k						
		0	Spent about the time planned								
		0	Spent less time than planne	ed							
7.	a)		is visit to Herbert Hoover NHS, the following topics? Please r nn a.		•	• •	_	•			
		these	d you and your personal group topics if you were to visit to He e circle mark answer for each	erbe	rt Hoo	ver NHS i		?			
			a) Lea	rne	d on tl	nis visit?	b) Future	interest?			
Top	oic			(•)	Yes	(●) <u>No</u>	(●) <u>Yes</u>	(●) <u>No</u>			
Ho	ove	r's hur	mble beginnings		0	Ο	0	0			
Ho	ove	r's chi	dhood family and fellowship		0	Ο	0	Ο			
Ho	ove	r's chi	dhood tragedies and triumphs		Ο	Ο	0	Ο			
Но	ove	r's fait	h, hope, and charitable nature		Ο	0	0	0			
Ho	ove	r's vie	w on nature and stewardship		Ο	0	0	0			
Ho	ove	r's pre	sidential legacy		Ο	0	0	0			
Lou	и Не	enry aı	nd the Hoover family		Ο	0	0	0			

- c) Please list any additional topics you and your personal group are interested in learning about.
- d) What is **one** story about Herbert Hoover's life and legacy that you would like to share with friends or relatives?
- 8. a) In **column a**, please mark (●) all the services that you and your personal group used that were specifically related to this park visit in the nearby communities of West Branch, Coralville/Iowa City, Cedar Rapids, and truck stops/gas stations along I-80.
 - O Did not use any services on this visit -> Go to part c of this question
 - b) In which communities did you obtain these support services? Please mark
 (●) all that apply in column b.

b) Community (●) Coralville/ Cedar I-80 trucks stops/ a) Used on this visit (●) West Branch **Iowa City** Rapids gas stations O O \mathbf{O} \mathbf{O} O Bought gasoline Ate meals in restaurants \mathbf{O} \mathbf{O} \mathbf{O} Used a drink/vending machine Bought groceries \mathbf{O} Stayed overnight in a \mathbf{O} \mathbf{O} \mathbf{O} \mathbf{O} O motel/hotel/B&B Stayed overnight in a \mathbf{O} \mathbf{O} \mathbf{O} \mathbf{O} O campground/RV park Shopped Obtained information about \mathbf{O} Herbert Hoover NHS Obtained other travel/ 00 tourist information Visited other nature/ historic/museum sites Other (Please specify) \mathbf{O} O O

c) Do you have a	any comments about community services?								
Service (List)	Community (Name)	Comment (Please be specific)							

9. a) For this visit, please mark (●) all the sites that you and your personal group visited at Herbert Hoover NHS. If you did not visit a site, please leave that circle blank.



b) On this visit, which **one** of the above park sites did you and your personal group visit **first**?

10.	a)	Prior to this visit to Herbert Hoover NHS, what was your perception of Herbert Hoover? Please mark (●) only one.							
		0	No prior opini	on		Ο	Mostly	positive	
		0	Neutral			0	Mostly	negative	
	b)		sult of this vi mark (●) only	-	our opinion	about l	Herber	t Hoover chan	ged?
		0	No, no chang	е					
		0	Yes, more po	sitive vie	W				
		0	Yes, more ne	gative vi	ew				
11.	a)		this visit (viewi ing about Herb						
		0	Yes .	0	No	()	Not sure	
	b)		what is the mo today?	ost impor	tant way tha	t Hoov	er's life	has relevance	e to
12.		What did Hoover I	d you and your NHS?	persona	ıl group like ı	most a	bout y	our visit to Her	bert ·
		What did Hoover I	d you and your NHS?	persona	l group like l	l east a	bout yo	our visit to Her	bert
									-

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1 101	DCITI	oover ivational	i i iiotorio C	TIC VISILOI C	ituuy					
13.	B. a) Please mark (●) all of the visitor services and facilities at the <u>Herbert Hoover</u> <u>Presidential Library and Museum</u> that you or your personal group used .									
	 b) Next, for only those <u>Library and Museum</u> services and facilities that you or your personal group used, please rate their importance from 1-5. 									
	c) Finally, for only those <u>Library and Museum</u> services and facilities that you or your personal group used , please rate their quality from 1-5.									
	b) If used, c) If used, how important? what quality?									
a) Visitor services/facilities used? Mark (●) 1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important 5=Very poor 2=Poor 3=Average 4=Good 5=Very good										
	0	Library broch	ure							
	0	Museum film								
	0	Assistance from	om library	staff						
	0	Orientation p	rovided by	library staff	F					
	0	Museum exhi	ibits							
	0	Restrooms								
	0	Library's spec	cial progra	m						
	0	Library websi (used befo		oover.archivng this visit)	_					
	Ο	Library books (selection	store sales , price, qua							
14.		all, how would ry and Museu				erbert Hoover	Presid	<u>ential</u>		
	Ver	ry poor	Poor	Averag	je	Good	Very	good		

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- 15. a) Please mark (●) **all** of the visitor services and facilities that you or your personal group **used** at <u>Herbert Hoover NHS</u> during this visit.
 - b) Next, for only those services and facilities at <u>Herbert Hoover NHS</u> that you or your personal group **used**, please rate their importance to your visit from 1-5.
 - c) Finally, for only those services and facilities at <u>Herbert Hoover NHS</u> that you or your personal group **used**, please rate their quality from 1-5.

a) Visito Mark (●)	r services/facilities used?	b) If used, how important? 1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important	c) If used, what quality? 1=Very poor 2=Poor 3=Average 4=Good 5=Very good
0	Park brochure/map		
0	Assistance from park staff/ranger		
0	Visitor center exhibits		
0	Visitor center film		
0	Ranger-led programs		
Ο	Living history/costumed interpretati	on	
Ο	Trails in tallgrass prairie		
Ο	Outdoor exhibits		
0	Historic structures as exhibits		
0	Restrooms		
0	Junior Ranger program		
0	Access for disabled persons		
0	Park website: www.nps.gov/heho/ (used before or during this visit)		
0	Visitor center bookstore sales item: (selection, price, etc.)	S	

On this visit,	were you and your pe	ersonal group	with the fo	llowing t	type of groups	?
a) Commerci	al guided tour group	0	Yes	Ο	No	
b) School/ed	ucational group	Ο	Yes	0	No	
,	•		Yes	0	No	
				school/o	ther organized	b
O Alone		Ο	Family			
O Friend	ls	Ο	Family	and frie	nds	
O Other	(Please specify)					
	f you do not know an	answer, please) U.S. ZIP code name of country	se leave a e or c) try H	blank. Number erbert H	of visits to	
Yourself						
Member #2			_			
Member #3			_			
Member #4						
Member #5						
Member #6						
Member #6 Member #7			_			
	c) Other organisms. On this visit, group) were and of the control	business group, scout group, each of this visit, what kind of personal group) were you with? Please mare O Alone O Friends O Other (Please specify) For you and your personal group of information. If you do not know an beautiful and the control of the control o	c) Other organized group (such as business group, scout group, etc.) On this visit, what kind of personal group (not gu group) were you with? Please mark (•) only one O Alone O O Friends O O Other (Please specify) For you and your personal group on this visit, ple information. If you do not know an answer, please b) U.S. ZIP code name of count other than U.S. Yourself Member #2 Member #3 Member #4	c) Other organized group (such as business group, scout group, etc.) On this visit, what kind of personal group (not guided tour/group) were you with? Please mark (●) only one. O Alone O Family O Friends O Family O Other (Please specify) For you and your personal group on this visit, please provint information. If you do not know an answer, please leave a b) U.S. ZIP code or name of country other than U.S. lifeting Yourself Member #2 Member #3 Member #4 Member #4	c) Other organized group (such as business group, scout group, etc.) On this visit, what kind of personal group (not guided tour/school/ogroup) were you with? Please mark (●) only one. O Alone O Family O Friends O Family and friend of personal group on this visit, please provide the foinformation. If you do not know an answer, please leave a blank. b) U.S. ZIP code or name of country other than U.S. Yourself	c) Other organized group (such as business group, scout group, etc.) On this visit, what kind of personal group (not guided tour/school/other organized group) were you with? Please mark (•) only one. O Alone O Family O Friends O Other (Please specify) For you and your personal group on this visit, please provide the following information. If you do not know an answer, please leave a blank. b) U.S. ZIP code or name of country other than U.S. b) U.S. ZIP code or name of country other than U.S. For yourself Member #2 Member #3 Member #4

	,	this visit, how many vehicles did you and your personal group use to arrivene park?
		Number of vehicles
	c) On	this visit, how many times did you and your personal group enter the park?
		Number of entries
20.		es anyone in your personal group have a physical condition that made it cult to access or participate in park services or activities?
	0	Yes O No → Go to Question 21
	b) If Y	ES, what services or activities were difficult to access/participate in?
21.	persor	were to visit Herbert Hoover NHS in the future, how would you and your nal group prefer to learn about cultural and natural history/features of rt Hoover NHS? Please mark (•) all that apply.
	0	Not interested in learning about the park → Go to Question 22
	0	Indoor exhibits
	Ο	Outdoor exhibits
	Ο	Park website: www.nps.gov/heho
	Ο	Self-guided
	0	Volunteer opportunities
	0	Special events
	0	Interactive computer program tours
	0	Living history/costumed interpretive programs
	0	Electronic media/devices available to visitors (downloadable podcasts, MP3, Windows Media™, etc.)
	0	Audiovisual programs (DVD, video, or movie)
	Ο	Printed materials (brochures, books, maps, etc.)
	Ο	Other (Please specify)

22.	If you were a m would you prop	nanager planni ose? Please b	ng for the future one specific.	of Herbert Hoc	ver NHS, what
,					
,					
•					
23.	Is there anythin your visit to He		d your personal g NHS?	roup would lik	e to tell us about
,					
24.	recreational or	pportunities pr	the quality of the ovided to you and? Please mark (l vour persona	s, services, and I group at Herbert
	Very poor	Poor	Average	Good	Very good
	Ο	0	Ο	Ο	Ο

Thank you for your help! Please seal the questionnaire with the stickers provided and drop it in any U.S. mailbox.

OFFICIAL BUSINESS

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