



U.S. Department of the Interior

National Park Service
Social Science Program
Visitor Services Project



Dinosaur National Monument

Visitor Study



OMB Approval 1024-0224

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IN REPLY REFER TO:

United States Department of the Interior

NATIONAL PARK SERVICE
Dinosaur National Monument
4545 E. Highway 40
Dinosaur, CO 81610-9724



Summer 2013

Dear Visitor:

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

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 in the postage-paid envelope provided and drop it in any U.S. mailbox.

If you have any questions, please contact Lena Le, Director, Visitor Services Project, Park Studies Unit, College of Natural Resources, University of Idaho, 875 Perimeter Drive MS1139, Moscow, Idaho 83844-1139, 208-885-2585 (phone), lenale@uidaho.edu (email).

We appreciate your help.






Sincerely,

Mary Risser
Superintendent

DIRECTIONS

At the end of your visit:

1. Please have the selected individual (at least 16 years old) 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**. Please do not use pencil.

Like this:  Not like this:    

4. Seal it in the postage-paid envelope provided.
5. Drop it in a U.S. mailbox.

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. This information will be used by the National Park Service as authorized by 16 U.S.C. 1a-7. We will use this information to evaluate visitor services managed by Dinosaur National Monument. Your response is voluntary. Your name and contact information have been requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed and will in no way be connected with the results of this survey. 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.

We estimate that it will take about 20 minutes to complete this. You may send comments concerning the burden estimates or any aspect of this information collection to: Lena Le, Director, Visitor Services Project, Park Studies Unit, College of Natural Resources, University of Idaho, 875 Perimeter Drive MS1139, Moscow, Idaho 83844-1139, 208-885-2585 (phone), lenale@uidaho.edu (email).

Your Visit To Dinosaur National Monument

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

1. a) Prior to this visit, how did your personal group obtain information about Dinosaur National Monument? Please mark (●) **all** that apply in column (a).

☐ Did not obtain information prior to visit → **Go to part (b) of this question**

- b) If you were to visit Dinosaur National Monument in the future, how would your personal group prefer to obtain information about the monument? Please mark (●) **all** that apply in column (b).

a) This visit	b) Future visit	Source of information
<input type="radio"/>	<input type="radio"/>	Friends/relatives/word of mouth
<input type="radio"/>	<input type="radio"/>	Inquiry to park via phone, mail, or email
<input type="radio"/>	<input type="radio"/>	Dinosaur National Monument website: www.nps.gov/dino
<input type="radio"/>	<input type="radio"/>	Other websites — Which one(s)? _____
<input type="radio"/>	<input type="radio"/>	Local businesses (hotels, motels, restaurants, etc.)
<input type="radio"/>	<input type="radio"/>	Maps/brochures
<input type="radio"/>	<input type="radio"/>	Newspaper/magazine articles
<input type="radio"/>	<input type="radio"/>	School class/program
<input type="radio"/>	<input type="radio"/>	Social media (Facebook, Twitter, etc.)
<input type="radio"/>	<input type="radio"/>	State welcome center/visitors bureau/chamber of commerce
<input type="radio"/>	<input type="radio"/>	Television/radio programs/DVDs
<input type="radio"/>	<input type="radio"/>	Travel guides/tour books (AAA, Fodors, walking, etc.)
<input type="radio"/>	n/a	Other, this visit (Specify) _____
n/a	<input type="radio"/>	Other, future visit (Specify) _____

- c) From the sources you used prior to this visit, did your personal group receive the type of information about the park that you needed?

☐ No ☐ Yes → **Go to Question 2**

- d) If NO, what type of park information did your personal group need that was not available? Please be specific.

2. a) Was every member of your personal group a resident of the Dinosaur National Monument **area** (within a 60-mile radius)?

☐ No ☐ Yes → **Go to Question 3**

- b) Was visiting Dinosaur National Monument the primary reason nonresident members of your personal group came to the **area** (within a 60-mile radius)?

☐ Yes ☐ No

- c) For the nonresident members of your personal group, what was the method of transportation used to travel **most of the distance** from home to the Dinosaur National Monument **area** (within a 60-mile radius)? Please mark (●) only **one**.

☐ Airplane ☐ Car ☐ RV/motorhome

☐ Bus/train ☐ Motorcycle ☐ SUV/truck/van

☐ Other (Please specify) _____

3. For this trip, what were the reasons that your personal group visited Dinosaur National Monument? Please mark (●) **all** that apply.

☐ Obtain a National Park Passport stamp ☐ Recreation (rafting, boating, hiking, walking, etc.)

☐ Visit a unit of the National Park Service ☐ View dinosaur fossils

☐ Unplanned visit, decided to stop after seeing road signs/talking to others

☐ Other reasons (Please specify) _____

4. On this visit, were the signs directing your personal group to and within Dinosaur National Monument adequate? Please mark (●) **one** answer for each of the following.

a) Highway signs ☐ Yes ☐ No ☐ Did not use

b) Signs in the park ☐ Yes ☐ No ☐ Did not use

- c) If you answered NO for any of the above, please explain.

Highway _____

In park _____

5. a) On this trip, did your personal group stay overnight away from home inside Dinosaur National Monument or in the **area** (within a 60-mile radius)?

☐ Yes ☐ No → **Go to Question 6**

- b) If YES, please list the number of nights your personal group stayed in Dinosaur National Monument and in the local **area** (within a 60-mile radius).

Number of nights **inside** Dinosaur National Monument _____

Number of nights in the **area** (within a 60-mile radius) _____

- c & d) In which types of accommodations did your personal group spend the nights inside the monument and in the local area? Please mark (●) **all** that apply.

Accommodation	c) Inside monument	d) Outside monument
Lodge, motel, rented condo/home, cabin, B&B	n/a	<input type="radio"/>
Residence of friends or relatives	n/a	<input type="radio"/>
RV/trailer camping in a developed campground	<input type="radio"/>	<input type="radio"/>
Tent camping in a developed campground	<input type="radio"/>	<input type="radio"/>
Backcountry camping	<input type="radio"/>	<input type="radio"/>
Other (Please specify below)	<input type="radio"/>	<input type="radio"/>

c) Inside monument _____ d) Outside monument _____

6. If your personal group **did not** stay overnight away from home in the monument or area within 60 miles of the monument, what were the reasons for not staying overnight? Please mark (●) **all** that apply.

- ☐ Did not intend to stay overnight/unplanned visit
- ☐ All lodging was full/booked; could not obtain a reservation
- ☐ Facilities lacked desired amenities (Please specify desired amenities below)
- _____
- ☐ Had lodging reservations elsewhere
- ☐ Location not convenient
- ☐ Lodging too expensive
- ☐ Not the right type of campground/lodging available
- ☐ Other reasons (Please specify) _____

7. a) On this visit, in which activities did your personal group participate within Dinosaur National Monument? Please mark (●) **all** that apply in column (a).
- b) If you were to visit the monument in the future, in which activities would your personal group prefer to participate within the monument? Please mark (●) **all** that apply in column (b).

a) This visit	b) Future visit	Activity
<input type="radio"/>	<input type="radio"/>	Attending ranger-led talks/programs
<input type="radio"/>	<input type="radio"/>	Camping in developed campgrounds
<input type="radio"/>	<input type="radio"/>	Creative arts (photography, drawing, painting, writing)
<input type="radio"/>	<input type="radio"/>	Day hiking/walking
<input type="radio"/>	<input type="radio"/>	Fishing
<input type="radio"/>	<input type="radio"/>	Overnight backpacking
<input type="radio"/>	<input type="radio"/>	Participating in Junior Ranger/Junior Paleontology programs
<input type="radio"/>	<input type="radio"/>	Picnicking
<input type="radio"/>	<input type="radio"/>	River rafting/boating
<input type="radio"/>	<input type="radio"/>	Shopping in park bookstore (at visitor centers)
<input type="radio"/>	<input type="radio"/>	Stopping at scenic overlooks/viewing scenery
<input type="radio"/>	<input type="radio"/>	Viewing petroglyphs
<input type="radio"/>	<input type="radio"/>	Viewing visitor center exhibits
<input type="radio"/>	<input type="radio"/>	Visiting quarry/viewing dinosaur fossils
<input type="radio"/>	n/a	Other – this visit (Specify)
n/a	<input type="radio"/>	Other – future visit (Specify)

- c) Which one of the above activities was the **primary** reason your personal group visited Dinosaur National Monument on this visit? Please list **one** activity.

8. a) On this trip, which of the following national park sites did your personal group visit **before arriving** at Dinosaur National Monument? Please mark (●) **all** that apply in column a).
- b) Which of the following national park sites does your personal group plan to visit **after leaving** Dinosaur National Monument? Please mark (●) **all** that apply in column b).

a) Before visit	b) After visit
<input type="radio"/> None	<input type="radio"/>
<input type="radio"/> Arches/Canyonlands National Parks	<input type="radio"/>
<input type="radio"/> Colorado National Monument	<input type="radio"/>
<input type="radio"/> Rocky Mountain National Park	<input type="radio"/>
<input type="radio"/> Yellowstone/Grand Teton National Parks	<input type="radio"/>
<input type="radio"/> Other, before visit (Please specify below)	n/a
<hr/>	
n/a	<input type="radio"/> Other, after visit (Please specify below)
<hr/>	

9. a) Please mark (●) **all** mapping devices that your personal group used to direct you to Dinosaur National Monument on this visit.

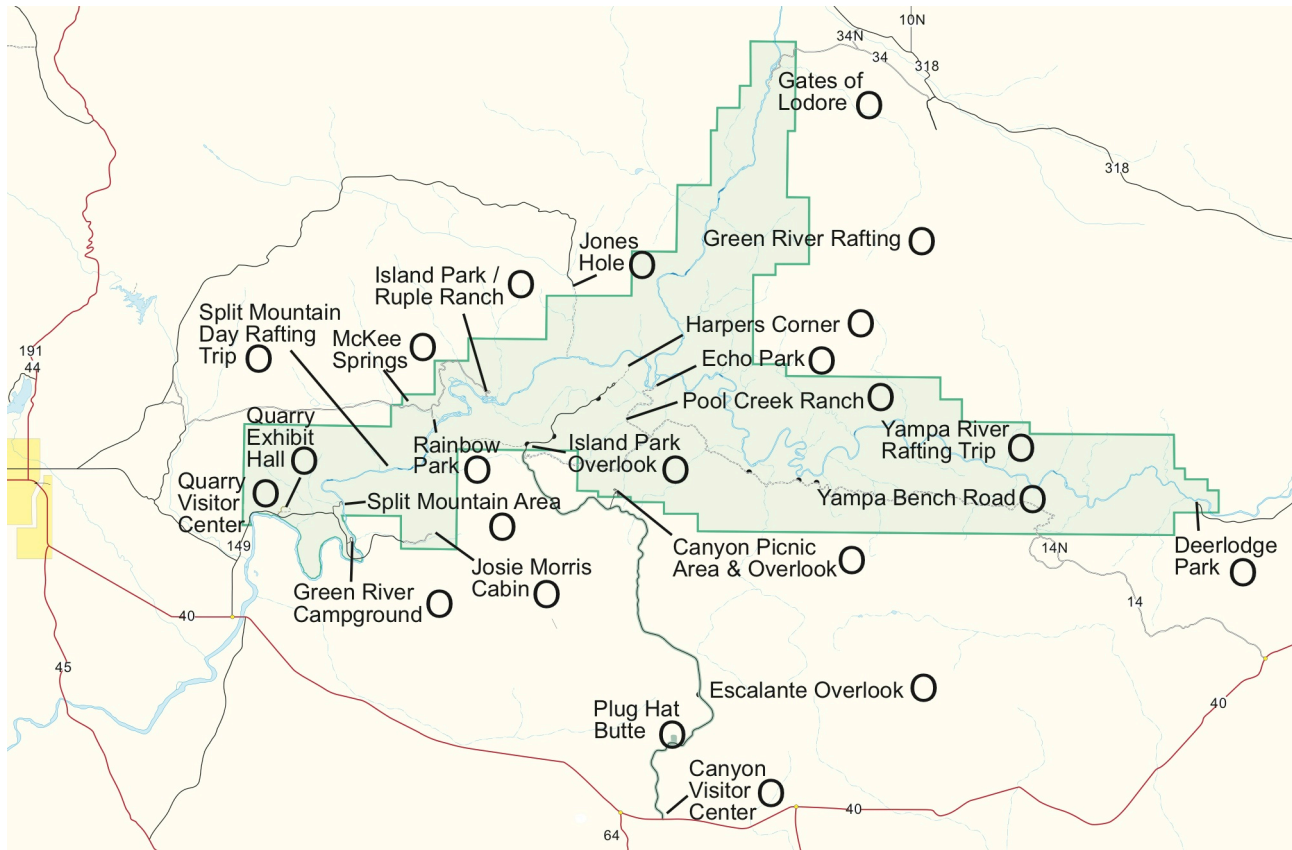
- ☐ None → **Go to Question 10**
- ☐ GPS devices
- ☐ Mapping website (Google Maps, Yahoo Maps, MapQuest, etc.)
- ☐ Smartphone/tablet mapping apps
- ☐ Printed maps/brochures
- ☐ Other (Please specify) _____

- b) Did your personal group have any difficulty locating Dinosaur National Monument using the above devices?

- ☐ Yes ☐ No → **Go to Question 10**

- c) If YES, what were the problems?

10. On this visit to Dinosaur National Monument, please mark (●), on the map below, **all** the sites within the monument that your personal group visited.



☐ Other site visited (Please specify) _____

11. a) Did anyone in your personal group have a physical condition that made it difficult to access or participate in activities or services at Dinosaur National Monument?

☐ Yes

☐ No → **Go on to Question 12**

- b) If YES, which monument activities or services did the person(s) have difficulty accessing or participating in during this visit? Please be specific.

12. On this visit, how long did your personal group spend visiting Dinosaur National Monument? Please list partial hours or days as $\frac{1}{4}$, $\frac{1}{2}$, or $\frac{3}{4}$.

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

- OR -

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

13. a) Please mark (●) **all** the visitor services and facilities that your personal group **used** at Dinosaur National Monument during this visit.
- b) For only those services and facilities that your personal group **used**, please rate their importance to your visit from 1-5.
- c) For only those services and facilities that your personal group **used**, please rate their quality from 1-5.

a) Visitor services/facilities used	b) If used, how important? 1=Not at all important 2=Slightly 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
Mark (●)		
<input type="radio"/> Assistance from park staff/volunteers	_____	_____
<input type="radio"/> Bookstore sales items (selection, price, etc.)	_____	_____
<input type="radio"/> Bulletin boards/kiosks	_____	_____
<input type="radio"/> Campgrounds	_____	_____
<input type="radio"/> Directional road signs	_____	_____
<input type="radio"/> Junior Ranger/Junior Paleontology programs	_____	_____
<input type="radio"/> Park brochure/map	_____	_____
<input type="radio"/> Park website: www.nps.gov/dino used before or during visit	_____	_____
<input type="radio"/> Ranger-led programs	_____	_____
<input type="radio"/> Roadside exhibits	_____	_____
<input type="radio"/> Trails	_____	_____
<input type="radio"/> Visitor center exhibits	_____	_____
<input type="radio"/> Visitor center film/movie	_____	_____
<input type="radio"/> Visitor center (overall)	_____	_____
<input type="radio"/> Waste disposal/recycling	_____	_____

14. Which items would your personal group like to have available for purchase at the visitor center bookstore on a future visit? Please mark (●) **all** that apply.

☐ Additional publications (books, brochures, etc.)

List subject(s) that interest you _____

☐ Convenience items (disposable cameras, batteries, bug repellent, etc.)

☐ Other (Please specify) _____

15. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to your personal group at Dinosaur National Monument during this visit? Please mark (●) **one**.

Very poor

Poor

Average

Good

Very good

☐

☐

☐

☐

☐

16. If you were a manager planning for the future of Dinosaur National Monument, what would your personal group recommend or propose?

17. a) In which communities did your personal group obtain support services (e.g. information, gas, food, lodging) for this visit to Dinosaur National Monument? Please mark (●) **all** that apply for each community.

a) Services used

Community	None	Information	Gas	Food	Lodging
Craig/Rangely, CO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dinosaur, CO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Jensen/Vernal, UT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (Specify below) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- b) Were you able to obtain all the services that your personal group needed in these communities?

☐ No

☐ Yes → **Go to Question 18**

c) If NO, what needed services were not available?

Service (List)

Comments (Please be specific)

_____	_____
_____	_____
_____	_____

18. For your personal group, please estimate all expenditures for the items listed below for this visit to Dinosaur National Monument and the surrounding **area** (within a 60-mile radius). **Please write "0" if no money was spent in a particular category.**

a) Please list your personal group's total expenditures inside Dinosaur National Monument.

b) Please list your personal group's total expenditures in the **surrounding area** outside the monument (within a 60-mile radius).

NOTE: Surrounding area residents should only include expenditures that were **just for this visit** to Dinosaur National Monument.

EXPENDITURES

	a) Inside park	b) Outside park
Spent no money (●)	<input type="radio"/> → Go to (b)	<input type="radio"/> → Go to (c)
Lodge, hotel, motel, cabin, B&B, etc.	n/a	\$ _____
Camping fees and charges	\$ _____	\$ _____
Guide/permit fees and charges (boating, rafting, etc.)	\$ _____	\$ _____
Restaurants and bars	n/a	\$ _____
Groceries and takeout food	n/a	\$ _____
Gas and oil (auto, RV, boat, etc.)	n/a	\$ _____
Other transportation expenses (rental cars, taxis, auto repairs, river shuttle service, but NOT airfare)	\$ _____	\$ _____
Admission, recreation fees (other than boating/rafting permit fees)	\$ _____	\$ _____
All other expenditures (souvenirs, books, postcards, sporting goods, clothing, donations, etc.)	\$ _____	\$ _____

c) How many people do the above expenses cover? Please write "0" if no children were covered by the expenditures.

_____ 18 years or over

_____ Under 18 years

19. During this visit to Dinosaur National Monument, how did the following elements affect your personal group's park experience? Please mark (●) **one** response for each element.

Element	Did not experience	Detracted from	No effect	Added to
Ranger-guided programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cattle or sheep grazing in monument	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Light pollution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Litter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Noise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pets/visitors with pets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public access to the rivers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ranger presence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Signs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Visitors demonstrating poor resource stewardship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. The National Park Service protects Dinosaur National Monument's natural, scenic, and cultural resources while at the same time providing for public enjoyment. How important is protection of the following monument resources/attributes to your personal group? Please mark (●) **one** answer for each resource/attribute.

Resource/attribute	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Clean air (visibility)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dark/starry night sky	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fossils	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Native plants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Native wildlife	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Natural quiet/sounds of nature	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Petroglyphs and historic sites	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recreational opportunities (hiking, rafting, fishing)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. If you were to visit Dinosaur National Monument in the future, how would your personal group prefer to learn about the monument's cultural and natural history during your visit to the monument? Please mark (●) **all** that apply.

- ☐ Not interested in learning about the monument → **Go to Question 22**
☐ Films, movies, videos ☐ As a volunteer in the monument
☐ Indoor exhibits ☐ Children's activities
☐ Roadside exhibits ☐ Ranger-guided walks/talks
☐ Trailside exhibits ☐ Park website: www.nps.gov/dino
☐ Self-guided tour using printed materials (brochures, books, maps, etc.)
☐ Self-guided tour using electronic media/devices (downloadable digital files, podcasts, cell phone tours, interactive computer tours, audio, etc.)
☐ Other (Please specify) _____

22. If you were to visit Dinosaur National Monument in the future, which topics would your personal group like to learn more about during your visit at the monument? Please mark (●) **all** that apply.

- ☐ Not interested in learning about listed topics → **Go to Question 23**
☐ Ecosystems (deserts, riparian, etc.) ☐ Night sky
☐ Geology ☐ Paleontology
☐ Human history ☐ Park management issues
☐ Recreation (hiking, rafting, etc.) ☐ Wildlife
☐ Other (Please specify) _____

23. On this visit, was your personal group part of the following types of organized groups? Please mark (●) **one** for each.

- | | | |
|---|---------------------------|--------------------------|
| a) Commercial guided tour/rafting group | <input type="radio"/> Yes | <input type="radio"/> No |
| b) Family reunion | <input type="radio"/> Yes | <input type="radio"/> No |
| c) School/educational group | <input type="radio"/> Yes | <input type="radio"/> No |
| d) Other (scouts, work, church, etc.) | <input type="radio"/> Yes | <input type="radio"/> No |

- e) If you were with one of these organized groups, how many people, including yourself, were in this group?

_____ Number of people in organized group

24. a) On this visit, what type of personal group (not guided tour/school/other organized group) were you with? Please mark (●) only **one**.

- ☐ Alone
 ☐ Friends
☐ Family
 ☐ Family and friends
☐ Other (Please specify) _____

b) On this visit, how many people were in your personal group, including yourself?
 _____ Number of people in personal group

c) On this visit, how many vehicles did your personal group use to arrive at the monument? If you did not arrive by vehicle please write "0".
 _____ Number of vehicles

d) On this trip, how many times did your personal group enter the monument?
 _____ Number of entries

25. For your personal group on this visit, please provide the following. (If you do not know the answer, please leave blank).

	a) Current age	b) U.S. ZIP code or name of country other than U.S.	c) Frequency of visits to Dinosaur National Monument 1 = First visit 2 = About once a month 3 = Several times a month 4 = Several times a year 5 = Once a year or less
Yourself	_____	_____	_____
Member #2	_____	_____	_____
Member #3	_____	_____	_____
Member #4	_____	_____	_____
Member #5	_____	_____	_____
Member #6	_____	_____	_____
Member #7	_____	_____	_____

26. Is there anything else your personal group would like to tell us about your visit to Dinosaur National Monument?

Thank you for your help! Please seal the questionnaire in the postage-paid envelope provided and drop it in any U.S. mailbox.

OFFICIAL BUSINESS

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