Lincoln Home
National Historic Site

Visitor Study
May 2005

Dear Visitor:

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

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

When your visit is over, please complete the 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 Coordinator, 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.

Sincerely,

Richard A. Lusardi
Superintendent
**DIRECTIONS**

One person in your group, at least 16 years of age, should complete the questionnaire. It should take about 20 minutes. When you have completed the questionnaire, please seal it with the stickers provided and drop it in any U.S. mailbox. We appreciate your help.

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**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 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 the Information Collection Clearance Officer, WASO Administrative Program Center, National Park Service, 1849 C Street, N.W., Washington, D.C. 20240.

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Please go on to the next page ➔
1. Prior to this visit to Lincoln Home National Historic Site, were you and your group aware that this park is managed by the National Park Service (NPS)?
   - Yes
   - No
   - Not sure

2. a) Prior to this visit, how did you and your group obtain information about Lincoln Home National Historic Site? Please check ( ) all that apply in the column on the left below.

   - Obtained no information prior to visit
   - Previous visits
   - Friends/relatives/word of mouth
   - Travel guides/tour books/publications
   - Maps/brochures
   - Telephone/written/email inquiry to park
   - State welcome center
   - Chamber of Commerce
   - Newspaper/magazine articles
   - Television/radio/videos
   - Park website: www.nps.gov/liho/
   - Other websites
   - Abraham Lincoln Presidential Library and Museum
   - Springfield Convention and Visitors Bureau
   - Illinois Tourism Bureau
   - Other places in Springfield (Specify:________________________)  
   - Other (Please specify: _______________________________)

   b) On future visits to Lincoln Home National Historic Site, what sources would you and your group prefer to use to obtain information in planning your visit? Please check ( ) all that apply in the column on the right below.
c) From the sources checked on page 4, did you and your group receive the type of information about the park that you needed?

____ No  ____ Yes  ____ Not sure

Go on to Question 3

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

______________________________________________________________

______________________________________________________________

3. On this trip, what was the primary reason that you and your group visited the Springfield, Illinois area (within city limits)? Please check ( ) only one.

_____ Resident of Springfield, Illinois  ➔ Go on to Question 4

_____ Visit Lincoln Home National Historic Site

_____ Visit other area attractions

_____ Visit friends/relatives in the area

_____ Passing through—unplanned visit

_____ Business

_____ Other (Please specify:________________________________________________________)

4. On this visit, what was your primary reason for visiting Lincoln Home National Historic Site? Please check ( ) only one.

_____ Learn about Abraham Lincoln

_____ Attend school program

_____ Show site to friends or relatives

_____ Purchase items in the museum shop

_____ Other (Please specify:________________________________________________________)

Please go on to the next page ➔
5. a) On this trip, did you and your group stay overnight away from home in Springfield, Illinois?
   ☐ Yes ☐ No ➔ Go on Part d of this Question
b) If YES, please list the number of nights you and your group stayed.
   __________ Number of nights in Springfield, Illinois
c) In what type of lodging did you and your group spend the night while in Springfield, Illinois? Please check (☐) all that apply.
   In Springfield, Illinois (☐)
   ☐ Lodge, motel, cabin, rented condo/home, or bed & breakfast
   ☐ RV/trailer camping
   ☐ Tent camping in developed campground
   ☐ Personal seasonal residence
   ☐ Residence of friends or relatives
   ☐ Other (Please specify: ________________________________)
d) In what town/city did you and your group stay on the night before your arrival at Lincoln Home National Historic Site? Do not answer if you stayed at home.
   Nearest town/city ____________________________ State ____________
e) In what town/city did you and your group stay on the night after your departure from Lincoln Home National Historic Site? Do not answer if you stayed at home.
   Nearest town/city ____________________________ State ____________

6. On this visit, were the signs directing you and your group to Lincoln Home National Historic Site adequate? Please check (☐) only one answer for each of the following.
   Signs on interstates ☐ Yes ☐ No ☐ Not sure
   Signs on state highways ☐ Yes ☐ No ☐ Not sure
   City street signs in communities ☐ Yes ☐ No ☐ Not sure
   Pedestrian signs in communities ☐ Yes ☐ No ☐ Not sure
7. On this visit, which of the following locations at Lincoln Home National Historic Site did you and your group visit? Please check ( ) all that apply. Use the map below to help you locate the sites.

- Lincoln Home National Historic Site Visitor Center
- Lincoln Home
- Dean House Exhibit “What a Pleasant Home Abe Lincoln Has”
- Arnold House Exhibit “If These Walls Could Talk”
- Lincoln Depot
- Legacy Gardens
- 8th Street corridor

Please go on to the next page ➔
8. On this visit to Lincoln Home National Historic Site, in what activities did you and your group participate? Please check ( ) all that apply.

_____ View films in Visitor Center
_____ Experience exhibits (in Visitor Center, Arnold House, and Dean House)
_____ Visit museum shop in Visitor Center
_____ Obtain assistance from park staff
_____ Take Lincoln Home tour
_____ Obtain National Park Service and area information
_____ Participate in Junior Ranger program
_____ Conduct historic/genealogy research
_____ Exercise (walk, jog, walk dog, etc.)
_____ Seek solitude
_____ Other (Please specify: ________________________________)

9. a) On this visit, how long did you and your group stay at Lincoln Home National Historic Site? (Please list partial hours, for example: 6-1/2 hours).

_____ Number of hours

b) On this visit, did you and your group visit the park on more than one day?

_____ No ______ Yes ➔ c) If YES, on how many days did you visit?

_____ Number of days

d) On this visit, how many times did you and your group enter Lincoln Home National Historic Site?

_____ Number of entries

e) On this visit to Lincoln Home National Historic Site, did you and your group have enough time to see and do all that you wanted to?

_____ No ______ Yes ➔ Go on to Question 10

f) If NO, please explain.__________________________________________________________

10. a) On this visit, did you and your group have any specific safety concerns while visiting Lincoln Home National Historic Site?

_____ Yes ______ No ➔ Go on to Question 11

b) If YES, what were they?________________________________________________________
11. a) Please check ( ) all the visitor services and facilities that you or your group **used** during this visit to Lincoln Home National Historic Site.

b) Next, for only those services and facilities that you or your group used, please rate their importance from 1-5.

c) Finally, for only those services and facilities that you or your group used, please rate their quality from 1-5.

<table>
<thead>
<tr>
<th>a) Used service/facility?</th>
<th>b) If used, how important?</th>
<th>c) If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check ( )</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Park brochure (Lincoln Home Official Visitor Guide)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Park map</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Other park handouts (park and area information, etc.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Films (in Visitor Center)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Lincoln Home tour</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Sales items in museum shop (in Visitor Center)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Assistance from park staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Junior Ranger program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Park website: <a href="http://www.nps.gov/liho/">www.nps.gov/liho/</a> used before or during visit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Access to Lincoln Depot</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Assistance from Lincoln Depot staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Visitor Center exhibits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Arnold House exhibit “If These Walls Could Talk”</td>
<td></td>
<td></td>
</tr>
<tr>
<td>____ Dean House exhibit “What a Pleasant Home Abe Lincoln Has”</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please go on to the next page ➔
12. a) Please check ( ) all the visitor services and facilities that you or your group used during this visit to Lincoln Home National Historic Site.

b) Next, for only those services and facilities that you or your group used, please rate their importance from 1-5.

c) Finally, for only those services and facilities that you or your group used, please rate their quality from 1-5.

<table>
<thead>
<tr>
<th>a) Used service/facility?</th>
<th>b) If used, how important?</th>
<th>c) If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check ( )</td>
<td>1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important</td>
<td>1=Very poor 2=Poor 3=Average 4=Good 5=Very good</td>
</tr>
</tbody>
</table>

______ Walkways/boardwalks
______ Outdoor exhibits/signs
______ Restrooms
______ Access for disabled persons
______ Parking areas

13. On this visit, what kind of personal group (not guided tour/school group) were you with? Please check ( ) only one.

______ Alone
______ Family
______ Friends
______ Family and friends
______ Other (Please specify: ________________________________)

14. On this visit, were you and your personal group with the following types of groups?

a) Guided tour group  ____ Yes  ____ No

b) Educational/school group  ____ Yes  ____ No

15. a) On this visit, how many people were in your personal group, including yourself?

______ Number of people

b) For this visit, please list the number of vehicles in which you and your group arrived.

______ Number of vehicles
16. For you and your personal group, please indicate:

<table>
<thead>
<tr>
<th>Current age</th>
<th>U.S. Zip Code or name of foreign country</th>
<th>Number of visits made to this park (including this visit) past 12 months</th>
<th>lifetime</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yourself</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #4</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Member #5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #7</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

17. a) On this visit, did anyone in your group have any disabilities/impairments that limited their ability to visit/enjoy Lincoln Home National Historic Site?
   
   _____ Yes   _____ No ➔ Go on to Question 18

   b) If YES, what kind of disability/impairment? Please check ( ) all that apply.
      
      _____ Hearing   _____ Mobility
      _____ Learning   _____ Visual
      _____ Mental   _____ Other (Specify: ____________________________)

   c) Because of the disability/impairment, did you and your group encounter any access/service problems in the park?
      
      _____ Yes   _____ No ➔ Go on to Question 18

   d) If YES, what were the problems? ______________________________

   ______________________________

18. a) What is the one language you and/or members of your group prefer to use for the following?

   Speaking                          Reading
   List one: ______________________  List one: ______________________

   Please go on to the next page ➔
b) What services in the park would you and your group like to have provided in languages other than English?

_____ None ➔ Go on to Question 19

Services that need to be translated: ________________________________

19. For you and each member (aged 16 or over) in your group on this visit, please indicate the highest level of education completed. Please check ( ) only one for each person.

<table>
<thead>
<tr>
<th>Highest level of education</th>
<th>Some High School</th>
<th>High School diploma/GED</th>
<th>Some college</th>
<th>Bachelor’s degree</th>
<th>Graduate degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yourself</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Member #2</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Member #3</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Member #4</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Member #5</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Member #6</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Member #7</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
</tbody>
</table>

20. a) On this visit, did you and your group take a tour of Lincoln Home?

_____ Yes  _____ No ➔ Go on to Question 21

b) If YES, please rate the amount of time you and your group spent for the two parts of the tour—outside and inside Lincoln Home. Please circle only one answer for each.

- Outside Lincoln Home tour
  - Too short
  - About right
  - Too long

- Inside Lincoln Home tour
  - Too short
  - About right
  - Too long

c) Please rate the following aspects of the tour. Please circle only one for each.

- Taking tour at desired time
  - Was able to take at desired time
  - Was NOT able to take at desired time

- Ability to view interior of the rooms because of tour size
  - Could see
  - Had difficulty seeing

- Topics covered on the tour
  - Of interest
  - NOT of interest

- Ability to make a personal connection to Abraham Lincoln as a result of the tour (Does his life have relevance to your life today?)
  _____ Yes  _____ No  _____ Not sure
d) On a future tour of Lincoln Home, would you and your group prefer to have a pre-visit reservation system to obtain tickets for the tour?

_____ Yes  _____ No  _____ Not sure

e) Please provide any additional comments on the tour of Lincoln Home.

____________________________________________________________________________________

____________________________________________________________________________________

21. Please indicate how the following elements may have affected your park experience on this visit. Please check ( ) only one for each element.

<table>
<thead>
<tr>
<th>Affect your experience?</th>
<th>Detracted from</th>
<th>No effect</th>
<th>Added to</th>
<th>Did not experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Background noise (such as lawn mowers, engines, etc.)</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>Modern vehicles</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
<tr>
<td>Modern streets/structures surrounding park</td>
<td>______</td>
<td>______</td>
<td>______</td>
<td>______</td>
</tr>
</tbody>
</table>

22. On a future visit to Lincoln Home National Historic Site, how would you and your group prefer to learn about or make personal connections to Abraham Lincoln (relevance of Lincoln's life to our lives today)? Please check ( ) all that apply.

_____ Not interested in learning about park or making personal connections to Abraham Lincoln ➔ Go on to Question 23

_____ Printed guidebook to the historic neighborhood

_____ Printed materials (books, brochures, maps)

_____ Audio-visual programs (videos, movies, slide shows)

_____ Self-guided audio tours

_____ Ranger-guided walks/programs

_____ Additional ranger tours focusing on subjects such as period furnishings, Mary Todd Lincoln, the Lincoln children, etc.

_____ Roving rangers available to answer questions

_____ Information desk staff

_____ Indoor exhibits

_____ Outdoor exhibits

_____ Internet websites

_____ Other (Please specify: ____________________________ )

Please go on to the next page ➔
23. For you and your group, please estimate all expenditures for the items listed below for this visit to Lincoln Home National Historic Site and Springfield, Illinois. Please write "0" if no money was spent in a particular category.

a) Please list your group's total expenditures inside Lincoln Home National Historic Site.

b) Please list your group's total expenditures in Springfield, Illinois.

NOTE: Surrounding area residents should only include expenditures that were directly related to this visit to Lincoln Home National Historic Site.

### EXPENDITURES

<table>
<thead>
<tr>
<th>Category</th>
<th>a) Inside Lincoln Home National Historic Site</th>
<th>b) Outside park in Springfield</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hotels, motels, cabins, B&amp;B, etc.</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>Camping fees and charges</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>Guide fees and charges</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>Restaurants and bars</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>Groceries and takeout food</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>Gas and oil (auto, RV, etc.)</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>Other transportation expenses</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>(rental cars, taxies, auto repairs, but not airfare)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Admission, recreation, entertainment fees</td>
<td>$__________</td>
<td></td>
</tr>
<tr>
<td>Parking fees</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>All other purchases (souvenirs, film, books, sporting goods, clothing, etc.)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>Donations</td>
<td>$__________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

c) How many people do the above expenses cover?

   Adults (18 years or over) ______   Children (under 18 years) ______

24. This park was established because of its significance to the nation. In your opinion, what is the national significance of Lincoln Home National Historic Site?

____________________________________________________________________

____________________________________________________________________
25. a) After this visit (viewing exhibits, movies, taking the tour, etc.), do you feel that you were able to make a personal connection to Abraham Lincoln (i.e. does his life have relevance to your life today)?

[ ] Yes [ ] No [ ] Not sure

b) If YES, what is the most important way that Lincoln's life has relevance to your life today?

____________________________________________________________________________________

____________________________________________________________________________________

26. On a future visit to Lincoln Home National Historic Site, what subjects would you and your group like to learn more about? Please check ( ) all that apply.

[ ] Not interested in learning about park  ➔ Go on to Question 27

[ ] Lincoln's childhood  [ ] Lincoln’s family life

[ ] Lincoln as a lawyer  [ ] Lincoln as President

[ ] Lincoln’s neighborhood

[ ] Other (Please specify: ________________________________________________________________)

27. If you were a manager planning for the future of Lincoln Home National Historic Site, what would you and your group propose? Please be specific.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

28. Is there anything else you and your group would like to tell us about your visit to Lincoln Home National Historic Site?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

29. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to you and your group at Lincoln Home National Historic Site during this visit? Please circle only one.

Very poor  Poor  Average  Good  Very good

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