Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Fort Scott National Historic Site. 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 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.

Sincerely,

Betty J. Boyko
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: [x] [ ] [ ]

4. Seal it in the postage-paid envelope provided.

5. Drop it in a U.S. mailbox.

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**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 cooperatively managed by Fort Scott National Historic Site. Your response is voluntary. Your name and address have been requested for follow-up purposes only. At the completion of this collection all names and personal information will be destroyed and 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 an average of 20 minutes to complete the survey associated with this collection of information. You may send comments concerning the burden estimates or any aspect of this information collection 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.

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**Your Visit To Fort Scott National Historic Site**

**NOTE:** In this questionnaire, your personal group is defined as anyone with whom you are visiting the park, 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.

1. a) Prior to this visit, how did you and your personal group obtain information about Fort Scott National Historic Site? Please mark (●) all that apply in column (a).
   - [ ] Did not obtain information prior to visit ➔ Go to part (b) of this question

1. b) If you were to visit Fort Scott National Historic Site 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).

<table>
<thead>
<tr>
<th>a) This visit</th>
<th>b) Future visit</th>
<th>Source of information</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Friends/relatives/word of mouth</td>
<td>[ ] Friends/relatives/word of mouth</td>
<td></td>
</tr>
<tr>
<td>[ ] Inquiry to park via phone, mail or email</td>
<td>[ ] Inquiry to park via phone, mail or email</td>
<td></td>
</tr>
<tr>
<td>[ ] Fort Scott National Historic Site website: <a href="http://www.nps.gov/fosc">www.nps.gov/fosc</a></td>
<td>[ ] Fort Scott National Historic Site website: <a href="http://www.nps.gov/fosc">www.nps.gov/fosc</a></td>
<td></td>
</tr>
<tr>
<td>[ ] Other websites — which one(s)?_________________________</td>
<td>[ ] Other websites — which one(s)?_________________________</td>
<td></td>
</tr>
<tr>
<td>[ ] Local businesses (hotels, motels, restaurants, etc.)</td>
<td>[ ] Local businesses (hotels, motels, restaurants, etc.)</td>
<td></td>
</tr>
<tr>
<td>[ ] Maps/brochures</td>
<td>[ ] Maps/brochures</td>
<td></td>
</tr>
<tr>
<td>[ ] Newspaper/magazine articles</td>
<td>[ ] Newspaper/magazine articles</td>
<td></td>
</tr>
<tr>
<td>[ ] Previous visits</td>
<td>[ ] Previous visits</td>
<td></td>
</tr>
<tr>
<td>[ ] School class/program</td>
<td>[ ] School class/program</td>
<td></td>
</tr>
<tr>
<td>[ ] Social media (such as Facebook, Twitter, etc.)</td>
<td>[ ] Social media (such as Facebook, Twitter, etc.)</td>
<td></td>
</tr>
<tr>
<td>[ ] State welcome center/visitors bureau/chamber of commerce</td>
<td>[ ] State welcome center/visitors bureau/chamber of commerce</td>
<td></td>
</tr>
<tr>
<td>[ ] Television/radio programs/DVDs</td>
<td>[ ] Television/radio programs/DVDs</td>
<td></td>
</tr>
<tr>
<td>[ ] Travel guides/tour books (such as AAA, etc.)</td>
<td>[ ] Travel guides/tour books (such as AAA, etc.)</td>
<td></td>
</tr>
<tr>
<td>[ ] Other, this visit (Specify) ___________________________</td>
<td>[ ] Other, this visit (Specify) ___________________________</td>
<td></td>
</tr>
<tr>
<td>n/a Other, future visit (Specify) ___________________________</td>
<td>n/a Other, future visit (Specify) ___________________________</td>
<td></td>
</tr>
</tbody>
</table>

1. c) From the sources you used prior to this visit, did you and 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 you and your personal group need that was not available? Please be specific.

2. Prior to this visit, were you and your personal group aware that Fort Scott National Historic Site is a unit of the National Park System?
   O No O Yes

3. On this trip, what was the primary reason that you and your personal group came to the city of Fort Scott, Kansas? Please mark (●) one.
   O Resident of Fort Scott, Kansas
   O Visit Fort Scott National Historic Site (includes use of park facilities/services/activities)
   O Visit other attractions in the area
   O Visit friends/relatives in the area
   O Traveling through – unplanned visit
   O Business
   O Other (Please specify) ______________________________

4. Which other local and regional attractions did you and your personal group visit on this trip to Fort Scott National Historic Site? Please mark (●) all that apply.
   O None visited on this trip ➔ Go to Question 5
   O Dolly the Trolley O Gordon Parks Center
   O Downtown Fort Scott O Mine Creek Battlefield
   O Fort Scott National Cemetery O Wilson’s Creek National Battlefield
   O George Washington Carver National Monument
   O Other (Please specify) ______________________________

5. a) On this trip, did you and your personal group stay overnight away from your permanent residence in Fort Scott, Kansas?
   O Yes O No ➔ Go to Question 6

b) If YES, please list the number of nights you and your personal group stayed in Fort Scott, Kansas.
   _____ Number of nights in Fort Scott, Kansas

6. On this trip, where did you and your personal group stay on the night before and the night after visiting Fort Scott National Historic Site? If you stayed at home, please write the name of the town/city and state where you live.
   a) BEFORE visit: Town/city __________________________ State __________
   b) AFTER visit: Town/city __________________________ State __________

7. a) On this visit, which forms of transportation did you and your group use to travel between your overnight accommodations or home and Fort Scott National Historic Site? Please mark (●) all that apply.
   O Private vehicle (car, SUV, pickup, RV, etc.) O Bicycle
   O Motorcycle O On foot
   O Rental vehicle O Tour/school bus
   O Other (Please specify) ______________________________

b) On this visit, how many vehicles did you and your personal group use to arrive at the park? Please write “0” if you did not arrive by vehicle.
   _____ Number of vehicles

8. On this visit, were the signs directing you and your personal group to Fort Scott National Historic Site adequate? Please mark (●) one response for each.
   a) Regional highway signs O Yes O No O Did not use
   b) City street signs O Yes O No O Did not use
   c) If you answered NO to either of the above, please explain the problem.
      Regional highway signs ______________________________
      City street signs ______________________________
9. a) In which communities did you and your personal group obtain support services (e.g., information, gas, food, lodging) for this visit to Fort Scott National Historic Site? Please mark (●) all that apply.

- Did not need support services  ➔ Go to Question 10
- Fort Scott, KS
- Iola, KS
- Nevada, MO
- Pittsburg, KS
- Other (Please specify) ________________________________

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

- No  ➔ Go to Question 10
- Yes

10. a) On this visit to Fort Scott National Historic Site, did anyone in your personal group participate in any of the ranger or volunteer-led talks/programs/tours?

- No  ➔ Go to Question 11
- Yes

b) If NO, what prevented you and your personal group from participating in ranger or volunteer-led talks/programs/tours? Please mark (●) all that apply.

- Not interested
- Not interested in topics presented
- Did not have time for this activity
- Not aware of ranger or volunteer-led talks/programs/tours offered at park
- Programs not offered at time of visit
- Other (Please specify) ________________________________

11. a) If you were to attend a ranger or volunteer-led program at Fort Scott National Historic Site, which program length would you prefer? Please mark (●) one.

- Under 1/2 hour
- 1/2 - 1 hour
- 1 - 2 hours
- Other (Please specify) ________________________________

b) Which one of the above activities was the primary reason you and your personal group visited Fort Scott National Historic Site on this visit?

- Cell phone
- Brochure
- Both
- Viewing videos/films
- Viewing indoor exhibits and furnished rooms
- Viewing outdoor exhibits and buildings
- Walking/hiking
- Other (Please specify below) ________________________________

12. a) During this visit to Fort Scott National Historic Site, did you and your personal group have any personal interaction with park staff?

- Yes  ➔ Go to Question 13
- No

13. a) On this visit, in which activities did you and your personal group participate within Fort Scott National Historic Site? Please mark (●) all that apply.

- Attending living history demonstrations/programs
- Attending ranger or volunteer-led talks/programs/tours (other than living history)
- Creative arts (photography/drawing/painting/writing)
- Enjoying solitude/quiet
- General sightseeing
- Nature study (viewing prairie plants, birds and other wildlife)
- Picnicking
- Shopping in park bookstore
- Taking self-guided tour - Which one?
- Viewing videos/films
- Viewing indoor exhibits and furnished rooms
- Viewing outdoor exhibits and buildings
- Walking/hiking
- Other (Please specify below) ________________________________

b) If YOU, please rate the quality of your interaction with the park staff. Please mark (●) one response for each item.

- Helpfulness
- Courteousness
- Quality of information provided

14. a) If you attended a talk, program, or tour on this visit, were you able to hear what the ranger or volunteer was saying?

- No  ➔ Go to Question 15
- Yes

b) Which one of the above activities was the primary reason you and your personal group visited Fort Scott National Historic Site on this visit?
b) If NO, what was/were the reason(s) for the problem? Please mark (*) all that apply.

- Group size too large
- Ranger/volunteer voice too quiet
- Train/traffic noise
- Hearing impairment
- Other (Please specify below)

15. a) On this visit, which ranger or volunteer-led talks/programs/tours, if any, did you attend? Please mark (*) all that apply in column (a).

b) If you attended more than one talk/program/tour, please choose one to evaluate by marking (*) column (b) on the right, then provide additional feedback on that talk/program/tour in parts (c-f) below.

a) Talk/program/tour attended

- Did not attend any talks/programs/tours on this visit → Go to Question 16
- Guided tour
- Talk
- Musical/dramatic/living history presentation
- Other (Please specify)

b) Select one to evaluate below

Please mark (*) one response for each of the following aspects of the talk/program/tour that you marked in part (b) above.

c) Program length

- Too short
- About right
- Too long

d) Effect of tour size on ability to see room interiors

- No effect - able to see
- Had difficulty seeing

e) Topics discussed

- Of interest
- NOT of interest

f) Did you learn something about Fort Scott National Historic Site from the talk/program/tour that is relevant or meaningful to your life today?

- Yes
- No
- Not sure

16. a) On this visit to Fort Scott National Historic Site, how much time in total did you and your personal group spend visiting the park?

   _____ Total number of hours (Please list partial hours as ¼, ½, ¾.)

b) Did you and your personal group visit the park on more than one day?

- No
- Yes → c) If YES, how many days? _____

17. a) Please mark (*) all of the information services and facilities that you or your personal group used at Fort Scott National Historic Site during this visit.

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

<table>
<thead>
<tr>
<th>a) Information service/facility used</th>
<th>b) If used, how important?</th>
<th>c) If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access for people with disabilities</td>
<td>1=Not at all important</td>
<td>1=Very poor</td>
</tr>
<tr>
<td>Assistance from park staff</td>
<td>2=Slightly important</td>
<td>2=Poor</td>
</tr>
<tr>
<td>Bookstore sales items</td>
<td>3=Moderately important</td>
<td>3=Average</td>
</tr>
<tr>
<td>(selection, price, etc.)</td>
<td></td>
<td>4=Very important</td>
</tr>
<tr>
<td>Cell phone tour</td>
<td></td>
<td>5=Extremely important</td>
</tr>
<tr>
<td>Junior Ranger program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living history demonstrations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indoor exhibits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outdoor exhibits</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Park brochure/map</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Park website: <a href="http://www.nps.gov/fosc">www.nps.gov/fosc</a> used before or during visit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ranger or volunteer-led programs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restrooms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Videos/films</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trails</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Visitor center - Post Hospital</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Service/facility (List)</th>
<th>Comment (Please be specific)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
18. If you were to visit Fort Scott National Historic Site in the future, how would you and your personal group prefer to learn about cultural and natural history/features of the park? Please mark (●) all that apply.

- Not interested in learning about the park  ➔ Go to Question 19
- Audiovisual programs (DVD, video, or audio)  ➔ Children's activities
- Informal interaction with park staff  ➔ Indoor exhibits
- Park website: www.nps.gov/fosc  ➔ Outdoor exhibits
- Self-guided tours with brochure  ➔ Special events
- Self-guided tours with cell phone  ➔ Volunteer opportunities
- Living history demonstrations/costumed interpretive programs
- Other electronic media/devices available to visitors (downloadable digital files, podcasts, interactive computer programs/tours, etc.)
- Printed materials (brochures, books, maps, etc.)
- Ranger or volunteer-led talks/programs/tours
- Other (Please specify)

19. a) Fort Scott National Historic Site was involved in some of the nation’s historically significant events. Please mark (●) all of the historical events that you were aware Fort Scott was involved in.

b) Please indicate how much your level of understanding of each event improved during your visit. Please mark (●) one answer for each event.

- Did not learn about any events on this visit  ➔ Go to part (c) of this question

   c) Next, mark (●) the events you would be interested in learning (or learning more) about on a future visit.

<table>
<thead>
<tr>
<th>a) Prior to your visit, aware of Fort Scott’s involvement?</th>
<th>b) Level of understanding improved?</th>
<th>c) Interested on future visit?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Event</td>
</tr>
<tr>
<td>Maintaining a permanent Indian frontier</td>
<td>Not at all</td>
<td>A little</td>
</tr>
<tr>
<td>Opening of the West/ Westward expansion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&quot;Bleeding&quot; Kansas</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Civil War</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

20. For you and your personal group, please estimate all expenditures for the items listed below for this visit to Fort Scott National Historic Site and Fort Scott, Kansas. Please write "0" if no money was spent in a particular category.

   a) Please list your group's total expenditures inside Fort Scott National Historic Site.

   - Spent no money inside the park  ➔ Go to part (b) of this question

   b) Please list your group's total expenditures in the city of Fort Scott, Kansas.

   - Spent no money in Fort Scott, Kansas  ➔ Go to part (c) of this question

   NOTE: Surrounding area residents should only include expenditures that were just for this trip to Fort Scott National Historic Site.

<table>
<thead>
<tr>
<th>EXPENDITURES</th>
<th>a) Inside park</th>
<th>b) Outside park</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lodges, hotels, motels, cabins, B&amp;Bs, etc.</td>
<td>n/a</td>
<td>$__________</td>
</tr>
<tr>
<td>Camping fees and charges</td>
<td>n/a</td>
<td>$__________</td>
</tr>
<tr>
<td>Guide fees and charges</td>
<td>n/a</td>
<td>$__________</td>
</tr>
<tr>
<td>Restaurants and bars</td>
<td>n/a</td>
<td>$__________</td>
</tr>
<tr>
<td>Groceries and takeout food</td>
<td>n/a</td>
<td>$__________</td>
</tr>
<tr>
<td>Gas and oil (auto, RV, boat, etc.)</td>
<td>n/a</td>
<td>$__________</td>
</tr>
<tr>
<td>Other transportation expenses (rental cars, taxis, auto repairs, but NOT airfare)</td>
<td>n/a</td>
<td>$__________</td>
</tr>
<tr>
<td>Admission, recreation, entertainment fees</td>
<td>n/a</td>
<td>$__________</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)  |  |  

   Please write "0" if no children were covered by the expenditures.
21. Would you and your personal group be likely to visit Fort Scott National Historic Site again in the future?
   - Yes, likely
   - No, unlikely
   - Not sure

22. a) Which category best represents your annual household income? Please mark (●) one.
   - Less than $24,999
   - $25,000-$34,999
   - $35,000-$49,999
   - $50,000-$74,999
   - $75,000-$99,999
   - $100,000-$149,999
   - $150,000-$199,999
   - $200,000 or more
   - Do not wish to answer

   b) How many people are in your household? _____ Number of people

23. On this visit, were you and your personal group part of the following types of organized groups?
   a) Commercial guided tour group
   - Yes
   - No

   b) School/educational group
   - Yes
   - No

   c) Other (scouts, work, church)
   - Yes
   - No

   d) 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, which type of personal group (not guided tour/school/other organized group) were you with?
   - 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

   c) How many times did you and your personal group enter Fort Scott National Historic Site on this visit?
   _____ Number of entries

25. For you only, what is the highest level of education you have completed? Please mark (●) one.
   - Some high school
   - Bachelor’s degree
   - High school diploma/GED
   - Graduate degree
   - Some college

26. For you only, what is your gender? Please mark (●) one.
   - Male
   - Female

27. For you and 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) Number of visits to Fort Scott National Historic Site (including this visit)

28. a) Are you or members of your personal group Hispanic or Latino? Please mark (●) one for each group member.
   - Yes, Hispanic or Latino
   - No, not Hispanic or Latino

   Yourself
   Member #2
   Member #3
   Member #4
   Member #5
   Member #6
   Member #7

   Yes, Hispanic or Latino
   O O O O O O O
   No, not Hispanic or Latino
   O O O O O O O
b) What is your race? What is the race of each member of your personal group? Please mark (●) one or more for you and each group member.

<table>
<thead>
<tr>
<th>Race</th>
<th>Yourself</th>
<th>Member #2</th>
<th>Member #3</th>
<th>Member #4</th>
<th>Member #5</th>
<th>Member #6</th>
<th>Member #7</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Indian or Alaska Native</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td></td>
</tr>
<tr>
<td>Black or African American</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td></td>
</tr>
<tr>
<td>Native Hawaiian or other Pacific Islander</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td></td>
</tr>
</tbody>
</table>

29. a) Does anyone in your personal group have a physical condition that made it difficult to access or participate in park activities or services?
   - O Yes
   - O No  [Go on to Question 30]

   b) If YES, what services or activities were difficult to access/participate in?

30. If you were a manager planning for the future of Fort Scott National Historic Site what would you and your personal group propose?

31. Is there anything else you and your personal group would like to tell us about your visit to Fort Scott National Historic Site?

32. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to you and your personal group at Fort Scott National Historic Site during this visit? Please mark (●) one.
   - Very poor
   - Poor
   - Average
   - Good
   - Very good

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