



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

Visitor Services Project

Mount Rushmore National Memorial

Visitor Study



**United States Department of the Interior**

NATIONAL PARK SERVICE
Mount Rushmore National Memorial
13000 Highway 244, Building 31, Suite 1
Keystone, SD 57751-0268

IN REPLY REFER TO:

July 2007

Dear Visitor:

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

This questionnaire is only being given to a small percentage 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.

Sincerely,

A handwritten signature in cursive script that reads "Gerard Baker".

Gerard Baker
Superintendent

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) Seal it with the stickers provided
- 4) 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 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.

Please go on to the next page →

Your Visit To Mount Rushmore National Memorial

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 groups.

1. Prior to your visit, were you and your personal group aware that Mount Rushmore National Memorial is managed by the National Park Service?

_____ Yes _____ No

2. a) Prior to your visit, how did you and your personal group get information about Mount Rushmore National Memorial? In the left column below, please check (√) **all** that apply.

- b) Prior to a future visit, how would you and your personal group prefer to obtain information about Mount Rushmore National Memorial? In the right column below, please check (√) **all** that apply.

a) Prior to this visit (√)

b) Prior to future visits (√)

_____ Obtained no information prior to visit → **Go on to part b of this Question**

_____ Previous visits _____

_____ Friends/relatives/word of mouth _____

_____ Travel guides/tour books (such as AAA, etc.) _____

_____ Maps/brochures _____

_____ Television/radio programs/videos _____

_____ Newspaper/magazine articles _____

_____ E-mail/telephone/written inquiry to park _____

_____ Mount Rushmore National Memorial website: www.nps.gov/moru/ _____

_____ Concession website: www.xanterra.com/ _____

_____ Other websites _____

_____ State welcome center _____

_____ Chamber of commerce _____

_____ Street vendors _____

_____ Information from airport, motel or other business _____

_____ Other (Please specify below: _____

a) _____ b) _____)

- c) From the sources checked above, did you and your personal group receive the type of information about the park that you needed?

_____ No _____ Yes → **Go on to part e of this question**

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

e) If you and your personal group used the Mount Rushmore National Memorial website (www.nps.gov/moru/) prior to or during this visit, please rate how helpful the website was in planning your visit. Please circle **one** response below.

_____ Did not use park website → **Go on to Question 3**

Not at all helpful	Somewhat helpful	Helpful	Very helpful	Extremely helpful
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3. How did this visit to Mount Rushmore National Memorial fit into your travel plans? Please check (✓) **one**.

- _____ Mount Rushmore National Memorial was the primary destination
- _____ Mount Rushmore National Memorial was one of several destinations
- _____ Mount Rushmore National Memorial was not a planned destination

4. On this trip, what was the **primary** reason that you and your personal group visited the Black Hills area (within 60 miles of the memorial)? Please check (✓) **one**.

- _____ Resident of area (Black Hills) → **Go on to Question 5**
- _____ Visit Mount Rushmore National Memorial
- _____ Visit other attractions in the area
- _____ Visit friends/relatives in the area
- _____ Business/attend convention or special event
- _____ Other (Please specify: _____)

5. a) On this visit, were the signs directing you and your personal group to Mount Rushmore National Memorial adequate? Please check (✓) **one** answer for each of the following.

Signs on interstates	_____ Yes	_____ No
Signs on state highways	_____ Yes	_____ No
City street signs in communities	_____ Yes	_____ No
Signs within Mount Rushmore National Memorial	_____ Yes	_____ No

b) If you answered NO for any of the above, please explain: _____

6. On this trip, what other places did you and your personal group visit in the Black Hills area (within 60 miles of the memorial)? Please check (√) **all** that apply.

_____ None → **Go on to Question 7**

_____ Crazy Horse Memorial

_____ Badlands National Park

_____ Custer State Park

_____ Bear Country U.S.A.

_____ Journey Museum

_____ Reptile Gardens

_____ Mammoth Site—Hot Springs, SD

_____ Wind Cave National Park

_____ Jewel Cave National Monument

_____ Black Hills National Forest

_____ Deadwood, SD

_____ Black Hills Caverns, Rushmore Cave, Crystal Caverns

_____ Rushmore Borglum Story
in Keystone, SD

_____ Minuteman Missile National
Historic Site

_____ Sturgis, SD

_____ Wall, SD

_____ Other (Please specify: _____)

7. a) On this trip, did you and your personal group stay overnight **away from home** within the Black Hills **area** (within 60 miles of the memorial)?

_____ Yes

_____ No → **Go on to Question 8**



- b) If YES, how many nights did you and your personal group spend in the following types of accommodations? Please write the number of nights stayed.

**b) Number of nights
in Black Hills area**

Lodge, motel, cabin, rented condo/home, or bed & breakfast _____

Camping in developed campground _____

Backcountry campsite _____

Personal seasonal residence _____

Residence of friends or relatives _____

Other (Please specify: _____) _____

8. a) During this visit to Mount Rushmore National Memorial, did you and your personal group obtain information from a Mount Rushmore National Memorial uniformed employee (park ranger/volunteer/concession employee)?

_____ Yes

_____ No → **Go on to Question 9**



- b) If YES, on a scale from 1 to 5, please rate the quality of your interaction with the park ranger/volunteer/concession employee. Please circle **one** number for each.

	Very poor	Poor	Average	Good	Very good
Helpfulness	1	2	3	4	5
Courteousness	1	2	3	4	5

9. On this visit, what were the reasons that you and personal your group visited Mount Rushmore National Memorial? Please check (✓) **all** that apply.

- | | |
|---|--|
| <input type="checkbox"/> View/learn about the memorial | <input type="checkbox"/> Learn about four Presidents |
| <input type="checkbox"/> Visit a National Park Service site | <input type="checkbox"/> Attend special event |
| <input type="checkbox"/> Other (Please specify: _____) | |

10. a) As you were planning your trip to Mount Rushmore National Memorial, what activities did you and your personal group expect to include on this visit? Please check (✓) **all** that apply in the left column.

b) On this visit, what activities did you and your personal group participate in within Mount Rushmore National Memorial? Please check (✓) **all** that apply in the right column.

a) Activities expected (✓)	b) Activities on this visit (✓)
-----------------------------------	--

- | | |
|---|--------------------------|
| <input type="checkbox"/> Viewing/learning about the memorial | <input type="checkbox"/> |
| <input type="checkbox"/> Learning about the four Presidents | <input type="checkbox"/> |
| <input type="checkbox"/> Visiting information center and bookstore | <input type="checkbox"/> |
| <input type="checkbox"/> Attending ranger-led programs | <input type="checkbox"/> |
| <input type="checkbox"/> Visiting Lincoln Borglum Museum (main park visitor center) | <input type="checkbox"/> |
| <input type="checkbox"/> Shopping in park bookstore (sells books, DVDs, etc.) | <input type="checkbox"/> |
| <input type="checkbox"/> Shopping in park gift shop (sells T-shirts, souvenirs, etc.) | <input type="checkbox"/> |
| <input type="checkbox"/> Eating in park restaurant/snack shop | <input type="checkbox"/> |
| <input type="checkbox"/> Visiting American Indian tipi | <input type="checkbox"/> |
| <input type="checkbox"/> Walking the Presidential Trail (1/2-mile loop) | <input type="checkbox"/> |
| <input type="checkbox"/> Listening to audio tour | <input type="checkbox"/> |
| <input type="checkbox"/> Studying nature (viewing plants/wildlife, including birds) | <input type="checkbox"/> |
| <input type="checkbox"/> Hiking other than the Presidential Trail | <input type="checkbox"/> |
| <input type="checkbox"/> Visiting historic Sculptor's Studio | <input type="checkbox"/> |
| <input type="checkbox"/> Other (Please specify below: _____) | <input type="checkbox"/> |

a) _____ b) _____

c) Which **one** of the above activities was the primary reason you and your personal group visited Mount Rushmore National Memorial on this visit? Please list **one**.

11. On this visit to Mount Rushmore National Memorial, how long did you and your personal group spend visiting the park? List partial hours or days as 1/4, 1/2, 3/4.

- Number of hours **if less than 24 hours**
- Number of days **if 24 hours or more**

12. a) Please check (√) the interpretive/information services that you or your personal group **used** in Mount Rushmore National Memorial during this visit.
- b) Next, for only those services that you or your personal group used, please rate their importance to your visit from 1-5.
- c) Finally, for only those services that you or your personal group used, please rate their quality from 1-5.

a) Interpretive/information services used?	b) If used, how important?	c) If used, what quality?
	1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important	1=Very poor 2=Poor 3=Average 4=Good 5=Very good
Check (√)		

_____	Park brochure/map	_____	_____
_____	Park newspaper: <i>The Mount Rushmore Visitor's Guide</i>	_____	_____
_____	Lincoln Borglum Museum (visitor center) exhibits	_____	_____
_____	Film shown in visitor center	_____	_____
_____	Presidential Trail—self-guided walk	_____	_____
_____	Presidential Trail—ranger-led walk	_____	_____
_____	Other ranger-led talks	_____	_____
_____	Trailside exhibits	_____	_____
_____	Assistance from uniformed park staff	_____	_____
_____	Evening lighting ceremony	_____	_____
_____	Artist-in-Residence/Sculptor-in-Residence program	_____	_____
_____	Sculptor's Studio children's program	_____	_____
_____	Junior Ranger program	_____	_____
_____	Rushmore Ranger program	_____	_____
_____	Audio tour	_____	_____

d) Do you have any comments about the above interpretive/information services?

Service	Comment
_____	_____
_____	_____
_____	_____

13. a) Please check (✓) the visitor services and facilities that you or your personal group **used** in Mount Rushmore National Memorial 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.

a) Visitor services/facilities used?	b) If used, how important?	c) If used, what quality?
Check (✓)	1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important	1=Very poor 2=Poor 3=Average 4=Good 5=Very good

_____ Information center	_____	_____
_____ Sales items in bookstores (books/DVDs, etc. in visitor center, information center, or Sculptor’s Studio)	_____	_____
_____ Parking lot	_____	_____
_____ Restrooms	_____	_____
_____ Law enforcement/emergency/visitor assistance (e.g. jump-start vehicle, keys locked in vehicle)	_____	_____
_____ Access for disabled persons	_____	_____

d) Do you have any comments about the above visitor services and facilities?

Service/facility	Comment
_____	_____
_____	_____
_____	_____

14. a) Would you and your personal group visit Mount Rushmore National Memorial again?

_____ Yes, likely _____ No, unlikely _____ Not sure

b) Why or why not? _____

15. a) On this visit, did you and your personal group eat in the Mount Rushmore National Memorial restaurant/snack shop or shop in the gift shop?

_____ Yes _____ No → **Go on to Question 16**

b) If YES, please indicate how the following elements may have affected you and your personal group's dining or shopping experience. Please check (√) **one** for each.

Element	Very poor	Poor	Average	Good	Very good
Food service:					
Choice of menu items	1	2	3	4	5
Preparation of menu items	1	2	3	4	5
Price	1	2	3	4	5
Length of wait: (how long?) _____	1	2	3	4	5
Appearance of facility	1	2	3	4	5
Gift shop:					
Choice of sales items	1	2	3	4	5
Quality of sales items	1	2	3	4	5
Price	1	2	3	4	5
Length of wait: (how long?) _____	1	2	3	4	5

c) Please make any comments about the above elements. For example, if you were unable to find an item you wanted, please list it below.

Element	Comment
_____	_____
_____	_____
_____	_____

16. a) Was there anything you and your personal group expected to see or do on this visit to Mount Rushmore National Memorial that you were not able to?

_____ Yes _____ No → **Go on to Question 17**



b) If YES, what was it? _____

c) Why weren't you able to see or do what you wanted to?

17. What is the most important (educational, interesting, useful) information you learned while visiting Mount Rushmore National Memorial on this visit?

18. a) Mount Rushmore interpretive programs and exhibits discuss the following topics: sculpting the memorial, presidential history, American Indian culture/ history, Black Hills history, and plants and animals of the Black Hills. Please check (√) **all** of the topics you learned about on this visit.

_____ Did not learn about any topics on this visit → **Go on to part c of this question**

b) Please indicate how much your level of understanding of each topic improved during your visit. Please circle **one** answer for each topic.

c) Next, check (√) which topics you would be interested in learning more about on a future visit.

a) Learned on this visit? (√)	b) Level of understanding improvement?				c) Interested on future visit? (√)
	Not at all	A little	Somewhat	A lot	
_____ Sculpting the memorial	1	2	3	4	_____
_____ Presidential history	1	2	3	4	_____
_____ American Indian culture/ history	1	2	3	4	_____
_____ Black Hills history	1	2	3	4	_____
_____ Black Hills plants/animals	1	2	3	4	_____

d) Please list any additional topics you and your personal group are interested in learning about Mount Rushmore National Memorial.

19. On a future visit, how would you and your personal group prefer to learn about cultural and natural history/features of Mount Rushmore National Memorial? Please check (√) **all** that apply.

- | | |
|--|--|
| _____ Not interested in learning about the park | → Go on to Question 20 |
| _____ Indoor exhibits | _____ Outdoor exhibits |
| _____ Park website (www.nps.gov/moru) | _____ Ranger-led activities |
| _____ Junior Ranger program | _____ Children’s programs (other than Junior Ranger/ Sculptor’s Studio programs) |
| _____ Interactive computer programs | _____ Self-guided tours |
| _____ Sculptor-in-Residence program | _____ Volunteer opportunities |
| _____ Audiovisual programs (video, movie, etc.) | |
| _____ Electronic media (downloadable digital files, MP3 players, etc.) | |
| _____ Printed materials (brochures, books, maps, etc.) | |
| _____ Other (Please specify: _____) | |

20. On this visit, were you and your personal group part of the following types of larger, organized groups?

- a) Commercial guided tour group Yes No
- b) School/educational group Yes No
- c) Other organized group Yes No
(such as business group, scout group, etc.)

21. On this visit, what kind of personal group (not guided tour/school/other organized group) were you with? Please check (√) **one**.

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

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

Number of people

b) On this visit, how many vehicles did you and your personal group use to enter the park?

Number of vehicles

c) On this visit, how many times did you and your personal group enter Mount Rushmore National Memorial during your stay in the area?

Number of entries

23. Did you and your personal group use the audio tour in Spanish, Lakota, French, or German?

Yes No

24. a) When visiting a site such as Mount Rushmore National Memorial, what **one** language do you and your personal group prefer to use for the following?

Speaking

Reading

b) What services at the memorial would you like to have provided in languages other than English?

None → **Go on to Question 25**

25. For you only, what is your gender? Please check (√) **one**.

Male Female

26. For you and your personal group on this visit, please indicate (if you do not know the answer, leave blank).

	a) Current age	b) U.S. Zip Code or name of country other than U.S.	c & d) Number of visits made to Mount Rushmore National Memorial (including this visit)	
			past 12 months	lifetime
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

27. a) Are you or members of your personal group Hispanic or Latino? Please circle **one** answer for each group member.

b) What is your race? What is the race of each member of your personal group? Please check (√) **one or more** for you and each group member.

	Hispanic or Latino?		American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White
Yourself	Yes	No	_____	_____	_____	_____	_____
Member #2	Yes	No	_____	_____	_____	_____	_____
Member #3	Yes	No	_____	_____	_____	_____	_____
Member #4	Yes	No	_____	_____	_____	_____	_____
Member #5	Yes	No	_____	_____	_____	_____	_____
Member #6	Yes	No	_____	_____	_____	_____	_____
Member #7	Yes	No	_____	_____	_____	_____	_____

28. For you only, please indicate the highest level of education you have completed. Please check (√) **one**.

- _____ Some high school
- _____ High School Diploma/GED
- _____ Some college
- _____ Bachelor's Degree
- _____ Graduate Degree

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?

- _____ Yes
- _____ No → **Go on to Question 30**

b) If YES, on this visit, what activities or services did the person(s) have difficulty accessing or participating in? Please check (√) **all** that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Ranger-led programs | <input type="checkbox"/> Restrooms | <input type="checkbox"/> Presidential Trail |
| <input type="checkbox"/> Museum exhibits | <input type="checkbox"/> Amphitheater | <input type="checkbox"/> Sculptor's Studio |
| <input type="checkbox"/> Visitor center | <input type="checkbox"/> Restaurant/
snack shop | <input type="checkbox"/> Gift shop |
| <input type="checkbox"/> Audio tour | | |
| <input type="checkbox"/> Other (Please specify: _____) | | |

c) Because of the physical condition, what specific problems did the person(s) have? Please check (√) **all** that apply.

- Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits or programs, or information desk staff even with hearing aid)
- Visual (difficulty seeing exhibits, directional signs, visual aids that are part of programs even with prescribed glasses or due to blindness)
- Mobility (difficulty accessing facilities, services, or programs even with walking aid and/or wheelchair)
- Other (Please describe: _____)

30. a) Did you and your personal group attend a special event (such as cultural events, music, movies, etc.) during your visit to Mount Rushmore National Memorial?

Yes No

b) Whether or not you attended a special event on this visit, what kinds of special events would you and your personal group like to see offered at the park in the future?

31. a) In your opinion, how appropriate is the parking garage fee (\$8/vehicle/year or \$50/bus/day) you paid to park at Mount Rushmore National Memorial during this visit? Bus passengers' parking fee is included in their tour cost.

Too low About right Too high

b) Please provide any comments about parking. _____

32. Mount Rushmore National Memorial is considering adding additional services. Would you and your personal group use a picnic area or hiking trail?

Picnic area _____ Yes, likely _____ No, unlikely _____ Not sure

New, longer hiking trail _____ Yes, likely _____ No, unlikely _____ Not sure

33. If you were a manager planning for the future of Mount Rushmore National Memorial, what would you propose? Please be specific.

34. Is there anything else you and your personal group would like to tell us about your visit to Mount Rushmore National Memorial?

35. Overall, how would you rate the quality of the visitor facilities, services, and recreational opportunities provided to you and your personal group at Mount Rushmore National Memorial during this visit? Please circle **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.

OFFICIAL BUSINESS

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Park Studies Unit
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