



ID: XXXX

Cowpens National Battlefield Visitor Survey

On your recent visit to Cowpens National Battlefield, you agreed to participate in a survey from NPS about your trip. **Please have the same individual in your group who completed the onsite survey at the park complete this questionnaire.** In this questionnaire, your personal group is defined as you and anyone with whom you visited Cowpens National Battlefield on this trip, such as a spouse, family, friends, etc. This does not include the larger group that you might have traveled with, such as a school, church, scout, or tour group.

A visit is defined as the day in which you were contacted to complete the questionnaire. A trip is defined as the total extent of time away from your personal residence that could include multiple visits to Cowpens National Battlefield. Thank you for your participation.

Trip Description

1. Prior to this trip, how did you obtain information about Cowpens National Battlefield? Please mark (●) all that apply.

- | | |
|---|---|
| ☐ Did not obtain information prior to this trip | ☐ Newspaper/magazine articles |
| ☐ Previous visits | ☐ Other units of the National Park System (NPS) |
| ☐ Friends/relatives/word of mouth | ☐ School class/program |
| ☐ Inquiry to park via phone, mail, or email | ☐ Social media (such as Facebook, Instagram, etc.) |
| ☐ Official Cowpens National Battlefield website (nps.gov/cowp) | ☐ Welcome center/visitor bureaus/chamber of commerce |
| ☐ Other website (please specify): _____ | ☐ Travel guides/tour books (such as AAA, etc.) |
| ☐ Local businesses (hotels, restaurants, etc.) | ☐ Television/radio/podcast/streaming service |
| ☐ Maps/brochures | ☐ Live here/grew up here |
| | ☐ Other (please specify): _____ |

2. Did you have the information about Cowpens National Battlefield you needed on this trip? Please mark (●) one.

- ☐ Yes
- ☐ No (please specify the information you needed but didn't have on this trip):

3. Did you visit any other National Park Service sites on this trip? Please mark (●) one.

- ☐ Yes (please specify which sites, below): **OR** ☐ No

4. People are motivated to visit a National Park Service site for a variety of reasons. How important to you were each of the following reasons or motivations for visiting Cowpens National Battlefield on this trip? Please mark (●) one for each row.

	<u>Not at all</u> <u>Important</u> (1)	<u>Slightly</u> <u>Important</u> (2)	<u>Moderately</u> <u>Important</u> (3)	<u>Very</u> <u>Important</u> (4)	<u>Extremely</u> <u>Important</u> (5)
1) To visit a National Park Service site	☐	☐	☐	☐	☐
2) To experience solitude	☐	☐	☐	☐	☐
3) To hear the sounds of nature/quiet	☐	☐	☐	☐	☐
4) To learn more about nature	☐	☐	☐	☐	☐
5) To learn more about history and culture	☐	☐	☐	☐	☐
6) To spend time with family/friends	☐	☐	☐	☐	☐
7) To get physical exercise	☐	☐	☐	☐	☐
8) To view wildlife or natural scenery	☐	☐	☐	☐	☐
9) To relax	☐	☐	☐	☐	☐
10) Other (please specify): _____	☐	☐	☐	☐	☐

5. Of the reasons listed in Question 4, which was the most important reason for you to visit Cowpens National Battlefield on this trip?

_____ reason number

Park Activities, Programs, and Services

6. On this trip, in which of the following programs and services did you personally participate within Cowpens National Battlefield? Please mark (●) all that apply.

- ☐ Attending a ranger-led activity, such as a tour or talk
- ☐ Talking informally with a ranger
- ☐ Viewing outdoor exhibits
- ☐ Viewing indoor exhibits
- ☐ Attending a cultural demonstration or performance (including historical weapons demonstrations)
- ☐ Reading the park brochure or newspaper
- ☐ Going to a visitor center
- ☐ Watching movies or videos about the park

- ☐ Participating with a child in your group in the Junior Ranger program
- ☐ Participating in the Junior Ranger program
- ☐ Obtaining a National Park passport stamp
- ☐ Listening to an audio tour or podcast
- ☐ Using the National Park Service App
- ☐ Other (please specify): _____

7. If you were to visit Cowpens National Battlefield in the future, are there specific subjects you would like to learn about? Please mark (●) one.

☐ Yes (please specify subjects you would like to learn about, below): **OR** ☐ No

8. Did you use a personal electronic device while in Cowpens National Battlefield to do any of the following actions? Please mark (●) one for each row.

	Yes	No	Don't know
Make/receive a cell phone call	☐	☐	☐
Send/receive a text message	☐	☐	☐
Search the internet/email	☐	☐	☐
GPS/Navigation	☐	☐	☐
Share pics/videos/audio via social media	☐	☐	☐
Other (please specify): _____	☐	☐	☐

9. How important to you was it during your visit to Cowpens National Battlefield to use personal electronic devices to do each of the following, and how would you rate the quality of the service to do each? For each row, please mark (●) one for importance and one for quality of service.

	IMPORTANCE					QUALITY OF SERVICE					
	Not at all Important	Slightly Important	Moderately Important	Very Important	Extremely Important	No Service	Poor	Average	Good	Very Good	Not Applicable
	(1)	(2)	(3)	(4)	(5)	(1)	(2)	(3)	(4)	(5)	(X)
Make/receive a cell phone call	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Send/receive a text message	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Search the internet/email	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
GPS/Navigation	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Share pics/videos/audio via social media	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Other (please specify below): _____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

10. Did anyone in your personal group have difficulties accessing or participating in park activities or services within Cowpens National Battlefield during your trip? Please mark (●) one.

➤ ☐ Yes ☐ No [Go to Question 11]

➤ Which specific difficulties did the person(s) have? Please mark (●) all that apply.

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

The following two questions identify the strengths and weaknesses in the site’s visitor experience. Cowpens National Battlefield managers rely on this information to make decisions that benefit the general public.

11. What did you like most about your visit to Cowpens National Battlefield?

1. _____
2. _____

12. What did you like least about your visit to Cowpens National Battlefield?

1. _____
2. _____

13. To what extent do you agree or disagree with each of the following statements? Please mark (●) one for each row.

[illegible]

14. How would you rate the quality of the park facilities, visitor services, and recreational opportunities in Cowpens National Battlefield? Please mark (●) one for each row.

[illegible]

	<u>Very Poor</u>	<u>Poor</u>	<u>Average</u>	<u>Good</u>	<u>Very Good</u>	<u>Not Used or Not Available</u>
	(1)	(2)	(3)	(4)	(5)	(X)
Ranger programs	☐	☐	☐	☐	☐	☐
Commercial services in the park (food, lodging, gifts, rental, etc.)	☐	☐	☐	☐	☐	☐
Other services (please specify below):	☐	☐	☐	☐	☐	☐
Recreation Opportunities						
Learning about nature, history, or culture	☐	☐	☐	☐	☐	☐
Outdoor recreation (sightseeing, camping, bicycling, boating, hiking, etc.)	☐	☐	☐	☐	☐	☐

15. Overall, how would you rate the quality of the park facilities, visitor services, and recreational opportunities in Cowpens National Battlefield? Please mark (●) one.

☐ (1) Very poor ☐ (2) Poor ☐ (3) Average ☐ (4) Good ☐ (5) Very good

Background/Demographics

16. Excluding the park you were initially contacted in, how many visits have you made to other National Park Service sites over the past 12 months? (Please enter 0 if none) _____ visits

17. Including yourself, how many people were in your personal group when you visited Cowpens National Battlefield?

Note: Your personal group is you and companions with whom you visited Cowpens National Battlefield on this trip, such as a spouse, family, friends, etc. This does not include the larger group that you might have traveled with, such as a school, church, scout, or tour group.

_____ Adults (18 years or older)

_____ Children (under 18 years)

18. If you live in the US, what is your ZIP code? If not US, what is your country of residence?

ZIP Code ____ _

OR

Country _____

19. What is the highest degree or level of school you have completed? Please mark (●) one.

- ☐ Less than high school/some high school
- ☐ High school graduate
- ☐ Vocational/trade school certificate
- ☐ Some college
- ☐ Associate Degree (AA, AS, etc.)

- ☐ Bachelor's Degree (BA, BS, AB, etc.)
- ☐ Master's Degree (MS, MA, MEd, etc.)
- ☐ Professional Degree (MD, DD, etc.)
- ☐ Doctorate Degree (PhD, EdD, etc.)

20. Which of these categories best represents your annual household income? Please mark (●) one.

- ☐ Less than \$25,000
- ☐ \$25,000 to \$49,999
- ☐ \$50,000 to \$74,999
- ☐ \$75,000 to \$99,999

- ☐ \$100,000 to \$149,999
- ☐ \$150,000 to \$199,999
- ☐ \$200,000 or more
- ☐ Do not wish to answer

21. Including yourself, how many people contribute to your annual household income?

_____ people

22. Including yourself, how many people (adults and children) are in your household?

_____ people

23. What is your race and/or ethnicity? Select all that apply.

☐ American Indian or Alaska Native—Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.

☐ Asian—Provide details below.

- ☐ Chinese
- ☐ Asian Indian
- ☐ Filipino
- ☐ Vietnamese
- ☐ Korean
- ☐ Japanese

Enter, for example, Pakistani, Hmong, Afghan, etc.

☐ Black or African American— Provide details below.

- ☐ African American
- ☐ Haitian
- ☐ Ethiopian
- ☐ Jamaican
- ☐ Nigerian
- ☐ Somali

Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.

☐ Hispanic or Latino— Provide details below.

- ☐ Mexican
- ☐ Salvadoran
- ☐ Dominican
- ☐ Puerto Rican
- ☐ Cuban
- ☐ Guatemalan

Enter, for example, Colombian, Honduran, Spaniard, etc.

☐ Middle Eastern or North African— Provide details below.

- ☐ Lebanese
- ☐ Egyptian
- ☐ Iraqi
- ☐ Iranian
- ☐ Syrian
- ☐ Israeli

Enter, for example, Moroccan, Yemeni, Kurdish, etc.

☐ Native Hawaiian or Pacific Islander— Provide details below.

- ☐ Native Hawaiian
- ☐ Chamorro
- ☐ Fijian
- ☐ Samoan
- ☐ Tongan
- ☐ Marshallese

Enter, for example, Chuukese, Palauan, Tahitian, etc.

☐ White— Provide details below.

- ☐ English
- ☐ Irish
- ☐ Polish
- ☐ German
- ☐ Italian
- ☐ Scottish

Enter, for example, French, Swedish, Norwegian, etc.

24. Is there anything else you would like to tell us about Cowpens National Battlefield's facilities, services, or recreational opportunities?

Thank you for your time and participation in this survey.

Please place this packet into the postage-paid envelope and return it via any US Mail drop box.