

## Screener Sampling Protocol and Script for the Computer Tablet Survey

The potential respondent universe for this survey is all visitors to the park during sampling period. Potential respondents will be approached at highly visited area of the park, possibly the visitor center. Recruiting for that day's sampling will take place on-site (in the designated park) during the morning and afternoon. The respondents will be approached in a random manner.

DATE: \_\_\_\_\_ TIME \_\_\_\_\_ LOCATION \_\_\_\_\_ INTERVIEWER INITIALS:  
\_\_\_\_\_

*Good morning/afternoon. The National Park Service is in the process of developing a questionnaire that will be used to evaluate visitors' perceptions of sounds in national parks. As part of that effort we are asking visitors to provide feedback on this electronic version of the questionnaire. We would really like your input. This is completely voluntary and will take approximately five minutes of your time. This study has been approved by the Office of Management and Budget and the control number and expiration date are available upon your request. Your participation is voluntary and your responses will be completely anonymous.*

1. *Would you be willing to help us?*

**NO:** *I understand, for our records could you please give a short reason why you won't participate?*

**[RECORD REASON]** \_\_\_\_\_

Thank you, and have a great visit.

**YES:** *Great! First, I'd like to ask you just a couple of questions.*

2. **[check one; do not ask]** Gender

\_\_\_\_ Male

\_\_\_\_ Female

3. *Can you tell me which of the following categories best describes your age?*

\_\_\_\_ Under 18 → **[Thank respondent and terminate]**

\_\_\_\_ 18 to 49

\_\_\_\_ 50 or older

4. *On this visit did you do any hiking?*

- Yes     No
5. Are you visiting with any children under the age of 16?
- Yes     No

For those who agree to participate, the interviewer will give them a computer tablet and provide a location to complete the exercise.

*“Once you are done we would like to ask you a few questions to complete the process. Please have a seat here and please feel free to ask us any questions you may have. ”*

**The Paperwork Reduction Act statement will be available upon request.**

**PAPERWORK REDUCTION ACT STATEMENT:** *The National Park Service is authorized by 6 U.S.C. 1a-7 to collect this information. This information will be used by park managers to understand visitor perceptions of sound in [insert park name]. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. The permanent data connected with this collection will be anonymous. Please do not put your name or that of any member of your household 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.*

**OMB control Number:** 1024-XXXX - **Expiration Date:** XX/XX/XXXX

**BURDEN ESTIMATE:** *The public reporting for this collection is estimated to be five minutes per respondent. This includes the time to complete the questionnaire and to participate in the follow-up interview process. Direct comments regarding the burden estimate or any other aspect of this form to: Catherine Taylor, Volpe National Transportation Systems Center, 55 Broadway, Cambridge, MA 02142, [catherine.taylor@dot.gov](mailto:catherine.taylor@dot.gov) (email).*