

Site Profile – Fiscal Year 2017 Visitor Survey

1. Site name/designation (as it should appear on the survey form): _____

2. State: _____

3. Name of person completing this form: _____
Phone # _____ Email: _____

4. Site contact (e.g. site manager or park ranger who will be responsible for survey administration): _____
Site contact Phone #: _____ Site contact Email: _____

5. Mailing address (For FedEx deliveries - No P.O. boxes please):

6. What type of site is this? (Check all that apply)

_____ NCA	_____ Multiple Use	_____ LTVA
_____ National Monument	_____ Camping	_____ NLCS
_____ Wilderness	_____ WSR	_____ Education/Interp Ctr.
_____ Other : _____		

7. What is the estimated annual visitation at this site? _____

8. Please describe the sites activities and uses.

a. Primary Activities:

b. Other Activities and Uses:

9. Seasons of Use: (Check all that apply)

_____ Spring	_____ Summer	_____ Fall	_____ Winter
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10. Please identify any unusual circumstances that may affect user attitudes or survey responses:

11. Planned Dates for Survey to be administered (a maximum two-month period between January 15 and September 30, 2017): _____ to _____

Please continue to next page.

12. How do you rate the overall quality of *this* site, considering all of the following factors: supporting recreation use; condition of facilities; recreation information; staff service; and interpretation/environmental education; interim management conflicts? (Select one)

Very Poor Poor Fair Good Very Good

13. Are the facilities at the site accessible to people with disabilities? _____

14. If this is a fee site, please specify *all* the fees charged for the site.

*Please submit this completed form electronically to:
David Baker at djbaker@blm.gov*

*Thank you in advance for your participation in the 2017 Visitor Satisfaction Survey.
If you have any questions or need additional information,
contact David Baker via email or at 303-236-6313.*