

# Lowell National Historical Park Visitor Study



**The  
Visitor Services  
Project**

Superintendent letter to go here

**DIRECTIONS**

One adult in your group should complete the questionnaire. It should only take a few minutes. When you have completed the questionnaire, please seal it with the sticker provided and drop it in any U.S. mailbox. We appreciate your help.

**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. Data collected through visitor surveys may be disclosed to the Department of Justice when relevant to litigation or anticipated litigation, or to appropriate Federal, State, local or foreign agencies responsible for investigating or prosecuting a violation of law.  
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 12 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to the Office of Information and Regulatory Affairs of OMB, Attention Desk Officer for the Interior Department, Office of Management and Budget, Washington, D.C. 20503; and to the Information Collection Clearance Officer, Audits and Accountability Team, National Park Service, 1849 C Street, N.W., Washington, D.C. 20240.

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### VISITING LOWELL NATIONAL HISTORICAL PARK

1. Prior to this visit, how did you and your group get information about Lowell National Historical Park? Please check (✓) **all** that apply.

- \_\_\_\_\_ RECEIVED NO INFORMATION PRIOR TO VISIT – **GO ON TO QUESTION 2**
- \_\_\_\_\_ STATE TOURIST INFORMATION CENTER
- \_\_\_\_\_ HIGHWAY INFORMATION (signs and/or 1610 AM radio station)
- \_\_\_\_\_ CONVENTION/VISITOR BUREAU OR CHAMBER OF COMMERCE
- \_\_\_\_\_ FRIENDS OR RELATIVES
- \_\_\_\_\_ OTHER NATIONAL PARK
- \_\_\_\_\_ OTHER TOURIST ATTRACTION
- \_\_\_\_\_ TRAVEL GUIDE/TOUR BOOK
- \_\_\_\_\_ DAUGHTER/SON ATTENDED SCHOOL PROGRAM
- \_\_\_\_\_ WORLD WIDE WEB SITE
- \_\_\_\_\_ CONTACTED THE PARK BY PHONE OR MAIL
- \_\_\_\_\_ NEWSPAPER/MAGAZINE (Please specify: \_\_\_\_\_)
- \_\_\_\_\_ TV/RADIO
- \_\_\_\_\_ PREVIOUS VISIT(S)
- \_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

2. On this visit, what were your reasons for visiting Lowell National Historical Park? Please check (✓) **all** that apply.

- \_\_\_\_\_ VISIT A NATIONAL PARK SERVICE SITE
- \_\_\_\_\_ LEARN ABOUT INDUSTRIAL HISTORY
- \_\_\_\_\_ LEARN ABOUT HISTORY IN GENERAL
- \_\_\_\_\_ LEARN ABOUT PERSONAL/FAMILY HISTORY
- \_\_\_\_\_ SHOW A FRIEND/RELATIVE LOWELL, MASSACHUSETTS AND LOWELL NATIONAL HISTORICAL PARK
- \_\_\_\_\_ ENJOY RECREATION IN THE PARK (walk, bike, picnic, etc.)
- \_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

3. How did this visit to Lowell National Historical Park fit into your travel plans?  
Please check (✓) only **one**.

\_\_\_\_\_ LOWELL NHP WAS THE PRIMARY DESTINATION

\_\_\_\_\_ LOWELL NHP WAS ONE OF SEVERAL DESTINATIONS

\_\_\_\_\_ LOWELL NHP WAS NOT A PLANNED DESTINATION

4. On this trip, what other places did you visit in the Lowell National Historical Park area? Please check (✓) **all** that apply.

\_\_\_\_\_ NEW ENGLAND QUILT MUSEUM

\_\_\_\_\_ AMERICAN TEXTILE HISTORY MUSEUM

\_\_\_\_\_ BRUSH ART GALLERY

\_\_\_\_\_ WHISTLER HOUSE

\_\_\_\_\_ OTHER NATIONAL PARK SERVICE SITE

(Please specify: \_\_\_\_\_)

\_\_\_\_\_ ALUMNI FIELD (to attend Lowell Spinners baseball game)

\_\_\_\_\_ BOSTON, MA

\_\_\_\_\_ OTHER (Please specify: \_\_\_\_\_)

5. a) On this trip, how much time did you and your group **plan** to spend at Lowell National Historical Park?

\_\_\_\_\_ NUMBER OF HOURS PLANNED

- b) On this trip, how much time did you and your group **actually** spend at Lowell National Historical Park?

\_\_\_\_\_ NUMBER OF HOURS SPENT

6. a) Did your group have any trouble locating Lowell National Historical Park?

\_\_\_\_\_ YES \_\_\_\_\_ NO – **GO ON TO QUESTION 7**

- b) If YES, what was the difficulty? Please be specific.

\_\_\_\_\_

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7. a) Did your group have any trouble finding your way around at Lowell National Historical Park?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO – **GO ON TO QUESTION 8**

- [  
b) If YES, what was the difficulty? Please be specific.

\_\_\_\_\_

8. On the list below, please check (✓) **all** of the activities that you and your group participated in during this trip to Lowell National Historical Park.

\_\_\_\_\_ VISIT THE VISITOR CENTER

\_\_\_\_\_ VISIT BOOTT COTTON MILLS MUSEUM

\_\_\_\_\_ VIEW EXHIBITS

\_\_\_\_\_ VISIT MUSEUMS

\_\_\_\_\_ LEARN ABOUT THE INDUSTRIAL REVOLUTION

\_\_\_\_\_ VISIT TSONGAS INDUSTRIAL HISTORY CENTER

\_\_\_\_\_ VISIT SUFFOLK MILL TURBINE EXHIBIT

\_\_\_\_\_ VISIT BOOTT GALLERY (CHILD LABOR EXHIBIT)

\_\_\_\_\_ ATTEND BOARDING HOUSE PARK  
CONCERT/PERFORMANCE

\_\_\_\_\_ OTHER (Please describe: \_\_\_\_\_)

### **YOU AND YOUR OPINIONS**

9. On this visit, how many people were in your group, including yourself?

\_\_\_\_\_ NUMBER OF PEOPLE

10. a) On this visit, were you with a guided tour or educational group?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO – **GO ON TO QUESTION 11**

- [  
b) If YES, please indicate the name of the group you were with.

\_\_\_\_\_

11. On this visit, what kind of group were you with? Please check (✓) only **one**.

- ALONE  
 FAMILY WITH CHILDREN  
 FAMILY WITHOUT CHILDREN  
 FRIENDS  
 FAMILY AND FRIENDS  
 OTHER (Please describe: \_\_\_\_\_)

12. For you and each member of your group on this visit, please indicate:

	GENDER M=Male F=Female	CURRENT AGE	U.S. ZIP CODE OR NAME OF FOREIGN COUNTRY	NUMBER OF VISITS MADE TO THIS PARK (INCLUDING THIS VISIT)	
				PAST 12 MONTHS	PAST 5 YEARS
YOURSELF	_____	_____	_____	_____	_____
MEMBER #2	_____	_____	_____	_____	_____
MEMBER #3	_____	_____	_____	_____	_____
MEMBER #4	_____	_____	_____	_____	_____
MEMBER #5	_____	_____	_____	_____	_____
MEMBER #6	_____	_____	_____	_____	_____
MEMBER #7	_____	_____	_____	_____	_____

13. a) Is English the primary language that you and your group speak?

NO                       YES – **GO ON TO QUESTION 14**

[

b) If NO, please list your primary language: \_\_\_\_\_

**PLEASE GO ON TO NEXT PAGE**



14. For you and all the **adults** in your group on this visit, please indicate the highest level of education received. Please circle only **one** for each adult.

	<b>HIGHEST LEVEL OF EDUCATION</b>			
	SOME HS	HS GRAD	BACHELOR DEGREE	GRADUATE SCHOOL
YOURSELF	1	2	3	4
ADULT #2	1	2	3	4
ADULT #3	1	2	3	4
ADULT #4	1	2	3	4
ADULT #5	1	2	3	4
ADULT #6	1	2	3	4
ADULT #7	1	2	3	4

15. On a future visit to Lowell National Historical Park, what types of interpretive programs would you like to have available? Please check (✓) **all** that apply.

INTERPRETERS IN COSTUME       FAMILY ACTIVITIES  
 TEMPORARY MUSEUM EXHIBITS       LECTURES  
 CHILDREN'S PROGRAMS       MUSIC PROGRAMS  
 TEXTILE DEMONSTRATIONS       AUDIO TOURS  
 CANAL-RELATED PROGRAMS       BIKE TOURS  
 CRAFT DEMONSTRATIONS       MUSEUM TOURS  
 OTHER (Please specify: \_\_\_\_\_)

16. a) As a result of your visit, do you have a better understanding of why Lowell National Historical Park is nationally significant?

YES                       NO                       NOT SURE

b) What is the most important information you learned about Lowell National Historical Park?

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17. a) Please check (✓) the visitor services and facilities which you or your group **used** at Lowell National Historical Park during this visit.
- b) Next, for only those services which you or your group used, please rate their **importance** from 1-5.
- c) Finally, for only those services which you or your group used, please rate their **quality** from 1-5.

a) Used service in Lowell NHP?  Check (✓)	b) If used, how important?					c) If used, what quality?					
	Not important					Extremely important		Very poor		Very good	
	1	2	3	4	5	1	2	3	4	5	
_____ VISITOR CENTER SLIDE SHOW											
_____ VISITOR CENTER MUSEUM EXHIBIT											
_____ BOOTT MILLS MUSEUM EXHIBIT											
_____ <i>WORKING PEOPLE</i> EXHIBIT											
_____ MUSEUM STORES											
_____ SELF-GUIDED WALKING TOUR											
_____ RANGER-LED WALKING TOUR											
_____ CANAL TOUR											
_____ TROLLEY											
_____ RESERVATIONS/INFO PHONE LINE											
_____ HIGHWAY SIGNS											
_____ IN-PARK DIRECTIONAL SIGNS											
_____ PARKING											
_____ RESTROOMS											
_____ HANDICAPPED ACCESS											

PLEASE GO ON TO NEXT PAGE



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18. a) During this visit, did anything detract from your visit to Lowell National Historical Park?

\_\_\_\_\_ YES                      \_\_\_\_\_ NO – **GO ON TO QUESTION 19**

b) If YES, please specify: \_\_\_\_\_

19. a) On the scale below, please indicate from 1 to 5 how safe you and your group felt on this visit to Lowell National Historical Park. Please circle only **one**.

**How safe did you feel?**

Extremely safe					Extremely unsafe
1	2	3	4	5	

b) If you felt unsafe, please explain why: \_\_\_\_\_

\_\_\_\_\_

20. During this trip, how much money did you and your group spend for lodging, travel, food, and other items in the city of Lowell, Massachusetts? Please write "0" if you and your group did not spend any money in Lowell.

Local residents should only include expenditures that were **directly related** to this visit to the park.

\$ \_\_\_\_\_ LODGING (motel, camping, etc.)

\$ \_\_\_\_\_ TRAVEL (gas, rental car, bus fare, etc.)

\$ \_\_\_\_\_ FOOD (restaurant, groceries, etc.)

\$ \_\_\_\_\_ OTHER (recreation, film, books, gifts, etc.)

21. a) In your opinion, how appropriate is the amount of the \$4 fee for the Boott Cotton Mills Museum? Please circle only **one**.

<u>Too high</u>		<u>About right</u>		<u>Too low</u>
1	2	3	4	5

- b) In your opinion, how appropriate is the amount of the \$4 fee for the canal boat tour? Please circle only **one**.

<u>Too high</u>		<u>About right</u>		<u>Too low</u>
1	2	3	4	5

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22. a) What did you like **most** about your visit to Lowell National Historical Park?

\_\_\_\_\_

b) What did you like **least** about your visit to Lowell National Historical Park?

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23. Overall, how would you rate the quality of the visitor services provided to you and your group at Lowell National Historical Park during this visit? Please circle only **one**.

VERY GOOD      GOOD      AVERAGE      POOR      VERY  
POOR

24. If you were a manager planning for the future of Lowell National Historical Park, what would you propose? Please be specific.

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25. Is there anything else you and your group would like to tell us about your visit to Lowell National Historical Park?

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Thank you for your help! Please seal the questionnaire with the sticker provided and drop it in any U.S. mailbox.



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**OFFICIAL BUSINESS**

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