Appendix A

Email to Executive Directors

OMB Control # XXXX-NEW

Expiration Date: xx/xx/20xx

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Completion of this questionnaire is voluntary. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Administration on Developmental Disabilities, Administration for Children and Families, US Department of Health and Human Services, 370 L'Enfant Promenade, S.W., MAIL STOP: Humphrey Building, 405D, Washington, D.C. 20447 ATTN: PRA (xxxx-xxxx*). Do not return the completed form to this address.

[DATE]

Dear Mr./Ms./Dr. ____:

As followup to an email recently sent to you by Commissioner Sharon Lewis, I would like to invite you to complete a questionnaire on ADD's current and future roles in the developmental disabilities community and obtain recommendations on how ADD can better meet its goals under the Developmental Disabilities Act (DD Act).

The questionnaire was developed with assistance from three of your Executive Director colleagues and received a public review as part of the Office of Management and Budget (OMB) clearance process. The questionnaire and data collection effort were approved by OMB on ______(OMB #_____). The questionnaire is expected to take 60 minutes or less to complete. All information will be confidential, to the extent provided by law, and no one will be identified in any reporting that takes place.

Completion of this questionnaire is voluntary. Data will be incorporated into some sections of the National Study findings. In addition, the questionnaire will be analyzed on its own. This analysis will be particularly useful to ADD in helping to set the direction of the agency in working with the DD Network programs to meet its goals under the DD Act. Below you will find your username and a link to the questionnaire. To complete the questionnaire, please click on the following link: add final link here. We ask that you complete the questionnaire **by xx/xx/2011**.

Login page: |LINK1|

Username: |UDF0|

Password: [insert PASSWORD column here].

If you have any problems with this link or username, or if you have any problems with the online questionnaire, please send an email to:XXXXXXXQWESTAT.COM.

If you have any questions regarding the content of the survey, please contact Lynn Elinson (<u>lynnelinson@westat.com</u> or 412 421-8610) or Martha Palan (<u>marthapalan@westat.com</u> or 401-289-0285) from Westat. IF YOU WOULD PREFER TO COMPLETE THIS QUESTIONNAIRE BY HAND, PLEASE LET US KNOW.

We appreciate you taking the time to complete this questionnaire.

Sincerely,

Lynn Elinson, Ph.D.