

APPENDIX A

NATIONAL SURVEY OF DIRECT CERTIFICATION PRACTICES

OMB No.: 0584-0529
Expiration Date: xx-xx-xxxx



National Survey of Direct Certification Practices
of the
National School Lunch Program
Direct Certification Improvement Study

ALL

If R = 1 or 2 then FILL = "65"

If R = 3 then FILL = "60"

Else FILL = "20"

Public reporting burden for this collection of information is estimated to average [FILL] 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. **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.** The OMB control number for this project is 0584-0529. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Department of Agriculture, Food and Nutrition Services, Office of Research and Analysis, Room 1014, Alexandria, VA 22302, ATTN: PRA (0584-0529). Do not return the completed form to this address.

Notes to the programmers:

Use the colors in the USDA FNS logo.

Respondent classification [R]:

- 1 = State with State-level matching
- 2 = State with district-level matching
- 3 = District selected for long survey
- 4 = District selected for short survey

.M = missing response

All *other (specify)* fields should be limited to 100 characters. The six open-ended questions (A1F, D5E, D5F, D13, E1C, and K3) should each be programmed for 1,000 characters.

At the bottom of each page, include links to save and quit, review answers, and go back. Also include the help desk email address and telephone number.

Login screen

Welcome to the survey for the *National School Lunch Program Direct Certification Improvement Study!* To access the survey, please enter your Login Identification Number and your Password. These were provided to you in your email invitation.

If you have trouble accessing the survey, or if you have any questions, please contact the help desk at [EMAIL ADDRESS] or [TELEPHONE NUMBER].

First screen after login

The study is being conducted for the U.S. Department of Agriculture, Food and Nutrition Service (FNS). The purpose of the study is to provide FNS with a comprehensive picture of the direct certification practices employed by States and districts and to explore the relationship between these practices and overall direct certification performance measures. Under the Richard B. Russell National School Lunch Act and the Child Nutrition Act of 1966, FNS has authority to conduct this study under its responsibility for the development and implementation of national policy for the National School Lunch Program. For more information please access the frequently asked questions.

This survey is designed to be completed by the child nutrition or food service program director or a designated member of your staff who has knowledge of direct certification procedures. We encourage you to circulate the survey among appropriate staff, if necessary, to obtain all responses. During the survey, we will ask about the following key topics:

- The matching method your State or district uses for direct certification
- Characteristics of the enrollment and program data used to conduct the match (e.g., data elements and their formats, how often the match is conducted, and the match rules that your State or district uses)
- The number of children in the program data used for your most recent match, as well as the number of children who were directly certified

Click here to print this list of topics. You may find it helpful to gather this information before starting the survey, but you will be able to save your progress and return at a later time if you need to. At the end of the survey, you will also be able to return to specific sections and provide responses to missing questions.

Your participation is voluntary. The responses that you provide will be kept private to the extent allowed by law. Results will be reported only at the State level, and the names of participating districts will not be revealed. It is possible that informed individuals may be able to infer the identity of respondents at the State level from the types of information provided, but we will not report names of respondents.

Second screen after login

Please read the following general instructions before proceeding:

- Please keep a copy of your completed questionnaire for your records. You will be able to review and print your responses at the end of the survey.
- If you are returning to finishing a partially completed questionnaire, you will return to the point where you left off.
- If you are starting a new questionnaire, you will start at the beginning with the first question.
- Please do not scroll through the actual questionnaire to preview questions. This may cause errors and we will need to contact you to collect any missing information.
- Please do not use the "Enter" key to advance to the next screen. This can result in questions being missed. When all questions on the screen have been answered, click the "Submit Page and Continue" button on the bottom of each page.
- If you are ready to begin the questionnaire, click the button below.

Screen to display when respondents save and leave the survey

Thank you for starting the NSLP Direct Certification Improvement Study survey. Your responses have been saved and you may return any time. When you log back in to the survey, you will start at the first unanswered question. Please complete the survey by [DATE].

If you have questions or need assistance with the survey, please contact the help desk at [EMAIL ADDRESS] or [TELEPHONE NUMBER].

ALL

A. INTRODUCTION

Direct certification is the process whereby school officials determine a child's eligibility for free school meals in the National School Lunch Program (NSLP) based on data provided by the State or local welfare office about participation in the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), or Food Distribution Program on Indian Reservations (FDPIR). Direct certification is generally implemented at the State or district level, or by mailing letters to all SNAP households in the State.

ALL

A1a **With State-level matching, a State agency (usually Child Nutrition) is responsible for a system that matches a list of children in NSLP schools with a list of children in SNAP households using a common identifier or identifiers. This system can be set up in a variety of ways. Some examples include:**

a1a

- **A State agency matches State enrollment information with a State list of children in SNAP households. A list of students directly certified on the basis of this match is forwarded to districts.**
- **An initial match is conducted by a State agency. A list of matched students is sent to districts, who then verify the matches, get further information on students who are "potential" matches, or conduct other types of secondary matching.**
- **Districts upload enrollment information into a State-maintained computer or web-based system that conducts a match to a list of children in SNAP households. Students are directly certified on the basis of this match.**

Does your State conduct matching at the State level for direct certification?

Yes 1

No 0

HARD CHECK: IF UNANSWERED Please select a response before proceeding.

ALL

If R = 1 or 2 then FILL = "Do any districts in your State"

Else FILL = "Does your district"

A1b With district-level matching, districts have primary responsibility for matching a list of children enrolled in their schools with a list of children in SNAP households using a common identifier or identifiers. Districts may use manual methods or their own computer system. [Do any districts in your State/Does your district] conduct matching at the district level for direct certification?

a1b

Yes 1

No..... 0

SOFT CHECK: IF R = 1 AND A1A = 0 You indicated your State does not conduct State-level matching for direct certification. With State-level matching, a State agency is responsible for a system that matches a list of children in NSLP schools with a list of children in SNAP households using a common identifier or identifiers. Please verify your responses before proceeding.

IF R = 2 AND A1B = 0 You indicated your State does not conduct district-level matching for direct certification. With district-level matching, districts have primary responsibility for matching a list of children enrolled in their schools with a list of children in SNAP households using a common identifier or identifiers. Please verify your responses before proceeding.

IF (R = 3 OR 4) AND A1B = 0 You indicated your district does not conduct district-level matching for direct certification. With district-level matching, districts have primary responsibility for matching a list of children enrolled in their schools with a list of children in SNAP households using a common identifier or identifiers. Please verify your responses before proceeding.

HARD CHECK: IF UNANSWERED Please select a response before proceeding.

A1A = 1 AND A1B = 1

A1c Which entity performs matching for direct certification first?

a1c

State 1

District..... 2

ALL

If R = 1 or 2 then FILL = "State"

Else FILL = "district"

A1d With the letter method, the State mails letters to all SNAP households notifying them of their children's eligibility for free school meals. Households who return the letters to the school district are certified for school meal benefits without having to fill out an application. Does your [State/district] certify students for free school meals using the letter method?

a1d

Yes 1

No 0

SOFT CHECK: IF A1A = 1 AND A1B = 0 AND A1D = 1 You indicated your State uses both State-level matching and the letter method for direct certification. Please verify your responses before proceeding.

IF A1A = 0 AND A1B = 1 AND A1D = 1 You indicated your State uses both district-level matching and the letter method for direct certification. Please verify your responses before proceeding.

IF A1A = 1 AND A1B = 1 AND A1D = 1 You indicated your State uses State-level matching, district-level matching, and the letter method for direct certification. Please verify your responses before proceeding.

HARD CHECK: IF UNANSWERED Please select a response before proceeding.

IF A1A = 0 AND A1B = 0 AND A1D = 0

If R = 1 or 2 then FILL = "State"

Else FILL = "district"

A1e How is direct certification conducted in your [State/district]?

a1e and
a1e_spec

Direct certification is not used 1

Other (specify) 2 GO TO H2

HARD CHECK: IF UNANSWERED Please select a response before proceeding.

A1E = 1

If R = 1 or 2 then FILL = "State"

Else FILL = "district"

A1f Why is direct certification not conducted in your [State/district]?

a1f

IF A1E = 1 GO TO H1A

ELSE IF (A1A = 0 AND A1B = 0 AND A1D = 1) GO TO A2

ELSE GO TO A3A

(R = 1 OR 2 OR 3) AND (A1D = 1)

Format as a drop-down box with digits 1 – 12.

A2 As a part of directly certifying students through the letter method, in what month does the State agency mail letters to SNAP households notifying them of their children's eligibility for free school meals?

a2

|_|_| MONTH

(R = 1 OR A1A = 1) AND A1B = 1

A3a Approximately what percentage of all school districts in your State perform data matching for direct certification? (Please include any districts that do matching in addition to that conducted at the State level.)

a3a

|_|_|_| % of all school districts in the State

SOFT CHECK: IF A3A LT 0 OR GT 100 Please provide a percentage between 0% and 100%.

(R = 1 OR A1A = 1) AND A1B = 1

A3b

What are the reasons districts perform data matching in addition to that conducted at the State level?

*a3b_1
through
a3b_7_spec*

MARK ALL THAT APPLY

- To confirm State-level data matching results (quality control) 1
 - To determine direct certification status of students identified by the State as “potential matches” 2
 - District preference 3
 - Statutory requirement 4
 - Additional check on new enrollments 5
 - State agency request 6
 - Other (specify) 7
- _____

IF A1A = 0 AND A1B = 0 GO TO C1
ELSE GO TO B1

B. ENROLLMENT DATA CHARACTERISTICS

ALL

B1 What is the primary source of student enrollment data used for direct certification?

b1 and
b1_spec

MARK ONE ONLY

- Statewide Student Information System (SSIS) 1 GO TO B3a
 - Electronic files maintained at district 2
 - Hard-copy files 3
 - Other (specify) 4
- _____

(R = 1 OR 2) AND B1 ^=1

B2a Does your State have or plan to have a Statewide Student Information System?

b2a

MARK ONE ONLY

- Yes, SSIS currently in place 1
- Yes, SSIS planned 2
- No 0

(R = 1 OR 2) AND B1 ^=1

B2b Does your agency expect to use the Statewide Student Information System for NSLP direct certification in the future?

b2b

MARK ONE ONLY

- No plans at the current time 1
- Yes, within the next 2 years 2
- Yes, within 3 to 4 years 3
- Yes, within 5 or more years 4
- Yes, but time frame is uncertain 5

IF B2A = 1 GO TO B3A
ELSE GO TO B8

R = 1 OR 2

B3a Does the Statewide Student Information System assign each student a unique statewide student ID, distinct from the Social Security number (SSN)?

b3a

Yes 1 GO TO B4a
No 0

(R = 1 OR 2) AND (B3A = 0 OR .M)

B3b Are there plans to implement a unique statewide student ID into the Statewide Student Information System?

b3b

MARK ONE ONLY

No plans 1
Yes, for school year 2012–2013..... 2
Yes, after school year 2012–2013..... 3
Yes, but no date set 4
Don't know d

R = 1 OR 2

B4a Of the total school districts in your State, what percentage is included in the Statewide Student Information System?

b4a

|_|_|_| % of all school districts in the State

SOFT CHECK: IF B4A LT 0 OR GT 100 Please provide a percentage between 0% and 100%.

R = 1 OR 2

B4b Of the total public school students in your State, what percentage is included in the Statewide Student Information System?
b4b

|_|_|_| % of total public school students in the State

SOFT CHECK: IF B4B LT 0 OR GT 100 Please provide a percentage between 0% and 100%.

R = 1 OR 2

B4c Of the total private school students in your State, what percentage is included in the Statewide Student Information System?
b4c

|_|_|_| % of total private school students in the State

SOFT CHECK: IF B4C LT 0 OR GT 100 Please provide a percentage between 0% and 100%.

R = 1 OR 2

B4d Of the total charter school students in your State, what percentage is included in the Statewide Student Information System?
b4d

|_|_|_| % of total charter school students in the State

SOFT CHECK: IF B4D LT 0 OR GT 100 Please provide a percentage between 0% and 100%.

R = 1 OR 2 OR 3

B5 What type of database is used for the Statewide Student Information System?

*b5 and
b5_spec*

MARK ONE ONLY

- Microsoft SQL 1
 - Oracle 2
 - Microsoft Access 3
 - SAS 4
 - DB2 5
 - Other (specify) 6
- _____

R = 1 OR 2 OR 3

B6a How are data entered into the SSIS?

*b6a_1
through
b6a_4_spec*

MARK ALL THAT APPLY

- Manual data entry 1
 - District staff upload enrollment files into system 2
 - Automatic process loads enrollment data into system.. 3
 - Other (specify) 4
- _____

R = 1 OR 2

B6b Does your agency perform data quality checks on the data that are entered into the Statewide Student Information System?

b6b

- Yes 1
- No 0 GO TO B7

(R = 1 OR 2) AND (B6B = 1 OR .M)

B6c What data quality checks are performed on the data that are entered into the Statewide Student Information System?

b6c_1
through
b6c_spec

MARK ALL THAT APPLY

- System has a set of validation rules and edit checks that are applied to data entered into the system..... 1
- Random sample audit checks of data are performed each year 2
- Follow-up with districts is routine for questionable data..... 3
- Audit checks are performed on randomly selected districts in the state 4
- An outside contractor performs data quality audits..... 5
- Other (specify) 6

R = 1 OR 2 OR 3

IF R =1 OR 2 FILL = "If districts or schools can choose when to update their data, please give the minimum frequency at which they are required to do so."

Else FILL ""

B7 How often are data from the Statewide Student Information System refreshed (updated) during the school year? [If districts or schools can choose when to update their data, please give the minimum frequency at which they are required to do so. / """]

b7 and
b7_spec

MARK ONE ONLY

- Ongoing, real-time updates 1
- Weekly 2
- Monthly 3
- Quarterly 4
- Three times per year 5
- Twice per year 6
- Once per year 7
- Other (specify) 8

R = 1 OR 2 OR 3

B8 **How are the student enrollment data transferred to the entity that conducts matching for direct certification?**

*b8_1
through
b8_8_spec*

MARK ALL THAT APPLY

- No transfer necessary; student enrollment data are housed at the entity that conducts matching 1
- Hard-copy lists are sent via mail 2
- Data disks are sent via mail 3
- Electronic files are sent via email 4
- Electronic files are uploaded via Internet..... 5
- Electronic files are uploaded via automatic process 6
- Data are entered through web browser 7
- Other (specify) 8

C. PROGRAM DATA QUESTIONS

R = 1 OR 2

C1 **Aside from SNAP, which program data are currently used to conduct direct certification in your State?**

*c1_1
through
c1_5_spec*

MARK ALL THAT APPLY

- Temporary Assistance to Needy Families (TANF)..... 1
- Food Distribution Program on Indian Reservations (FDPIR)..... 2
- Medicaid 3
- Foster care system 4
- Other (specify) 5
- _____
- No other program data are used to conduct direct certification..... 0

HARD CHECK: IF C1_1 THROUGH C1_5_SPEC UNANSWERED Please indicate which program data, aside from SNAP, are currently used to conduct direct certification in your State.

IF A1A = 0 AND A1B= 0 GO TO E1
ELSE GO TO C2

R = 1 OR 2

C2 **For purposes of direct certification, does the State child nutrition agency have a formal data sharing agreement and/or contract with the other agencies whose data are used in direct certification?**

c2

- Yes 1
- No..... 0

R = 1 OR 2

C3a How often does your agency get program data from **SNAP** for direct certification during the school year?

*c3a and
c3a_spec*

MARK ONE ONLY

- Ongoing, real-time updates 1
 - Weekly 2
 - Monthly 3
 - Quarterly 4
 - Three times per year 5
 - Twice per year 6
 - Once per year 7
 - Other (specify) 8
- _____

(R = 1 OR 2) AND C1_1 = 1

C3b How often does your agency get program data from **TANF** for direct certification during the school year?

*c3b and
c3b_spec*

MARK ONE ONLY

- Ongoing, real-time updates 1
 - Weekly 2
 - Monthly 3
 - Quarterly 4
 - Three times per year 5
 - Twice per year 6
 - Once per year 7
 - Other (specify) 8
- _____

(R = 1 OR 2) AND C1_2 = 1

C3c

*c3c and
c3c_spec*

How often does your agency get program data from FDPIR for direct certification during the school year?

MARK ONE ONLY

- Ongoing, real-time updates 1
 - Weekly 2
 - Monthly 3
 - Quarterly 4
 - Three times per year 5
 - Twice per year 6
 - Once per year 7
 - Other (specify) 8
- _____

(R = 1 OR 2) AND C1_3 = 1

C3d

*c3d and
c3d_spec*

How often does your agency get program data from Medicaid for direct certification during the school year?

MARK ONE ONLY

- Ongoing, real-time updates 1
 - Weekly 2
 - Monthly 3
 - Quarterly 4
 - Three times per year 5
 - Twice per year 6
 - Once per year 7
 - Other (specify) 8
- _____

(R = 1 OR 2) AND C1_4 = 1

C3e

*c3e and
c3e_spec*

How often does your agency get program data from the foster care system for direct certification during the school year?

MARK ONE ONLY

- Ongoing, real-time updates 1
 - Weekly 2
 - Monthly 3
 - Quarterly 4
 - Three times per year 5
 - Twice per year 6
 - Once per year 7
 - Other (specify) 8
- _____

(R = 1 OR 2) AND C1_5 = 1

FILL = C1_5_SPEC

C3f

*c3f and
c3f_spec*

How often does your agency get program data from [FILL FROM C1 OTHER SPECIFY] for direct certification during the school year?

MARK ONE ONLY

- Ongoing, real-time updates 1
 - Weekly 2
 - Monthly 3
 - Quarterly 4
 - Three times per year 5
 - Twice per year 6
 - Once per year 7
 - Other (specify) 8
- _____

R = 1 OR 2

C4a_1 For each SNAP data element listed below, please indicate whether it is used for matching.

c4a_1a
through
c4a_1u

	Used to Match?	
	Yes	No/Not available
<i>Student data elements:</i>		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<i>Parent data elements:</i>		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<i>Student, parent, or other data elements (specify):</i>		
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4A_1A THROUGH C4A_1U UNANSWERED For each SNAP data element, please indicate whether it is used for matching.

R = 1 OR 2 AND (C4A_1A ^=0 OR C4A_1B ^=0 OR ... OR C4A_1U ^=0)

C4a_2 For each **SNAP** data element used for matching, please indicate its format and whether missing values are allowed.

c4a_2a
through
c4a_3u

	C4a_2: Format?	C4a_3: Missing Values Allowed?	
		Yes	No
Student data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City		1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4A_2A THROUGH C4A_3U UNANSWERED For each SNAP data element, used for matching, please indicate its format and whether missing values are allowed.

These response options will be listed in drop-down boxes. Not all options will be listed for each data element. These options will be repeated in each similar question (C4a_2 through C4e_2).

- Numeric (for example, 3, 28, or 5004)..... 1
- Character or text (for example, *Smith* or *street*) 2
- Binary (for example, Y/N or 0=*male*/1=*female*) 3
- Date/Time: MMDDYYYY 4
- Date/Time: MM/DD/YYYY 5
- Date/Time: YYYYMMDD 6
- Date/Time: Long Date (for example, *Monday, June 15, 2009*) 7
- Date/Time: Universal Sortable Date/Time
Pattern (YYYY-MM-DD) 8
- Other Date/Time format 9
- Other date format..... 10

(R = 1 OR 2) AND C1_1 = 1

C4b_1 For each TANF data element listed below, please indicate whether it is used for matching.

c4b1 and
c4b_1a
through
c4b_1u

TANF data elements are identical to those used with SNAP 1 GO TO C4B_2

	Used to Match?	
	Yes	No/Not available
<i>Student data elements:</i>		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<i>Parent data elements:</i>		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<i>Student, parent, or other data elements (specify):</i>		
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4B_1A THROUGH C4B_1U UNANSWERED For each TANF data element, please indicate whether it is used for matching.

(R = 1 OR 2) AND [C1_1 = 1 AND (C4B_1A ^=0 OR C4B_1B ^=0 OR ... OR C4B_1U ^=0)] OR C4B1 = 1

C4b_2 For each TANF data element used for matching, please indicate its format and whether missing values are allowed.

c4b2 and
c4b_2a
through
c4b_3u

TANF data formats and missing value rules are both identical to those used with SNAP..... 1 GO TO C4C_1

	C4b_2: Format?	C4b_3: Missing Values Allowed?	
		Yes	No
Student data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City		1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4B_2A THROUGH C4B_3U UNANSWERED For each TANF data element, used for matching, please indicate its format and whether missing values are allowed.

(R = 1 OR 2) AND C1_2 = 1

C4c_1 For each **FDPIR** data element listed below, please indicate whether it is used for matching.

c4c1 and
c4c_1a
through
c4c_1u

FDPIR data elements are identical to those used with SNAP 1 GO TO C4C_2

	Used to Match?	
	Yes	No/Not available
Student data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):		
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4C_1A THROUGH C4C_1U UNANSWERED For each FDPIR data element, please indicate whether it is used for matching.

(R = 1 OR 2) AND C1_2 = 1 AND (C4C_1A ^=0 OR C4C_1B ^=0 OR ... OR C4C_1U ^=0)] OR C4C1 = 1

C4c_2 For each **FDPIR** data element used for matching, please indicate its format and whether missing values are allowed.

c4c2 and
c4c_2a
through
c4c_3u

FDPIR data formats and missing value rules are both identical to those used with SNAP..... 1 GO TO C4D_1

	C4c_2: Format?	C4c_3: Missing Values Allowed?	
		Yes	No
Student data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City		1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4C_2A THROUGH C4C_3U UNANSWERED For each FDPIR data element, used for matching, please indicate its format and whether missing values are allowed.

(R = 1 OR 2) AND C1_3 = 1

C4d_1 For each **Medicaid** data element listed below, please indicate whether it is used for matching.

*c4d1 and
c4d_1a
through
c4d_1u*

Medicaid data elements are identical to those used with SNAP 1 GO TO C4D_2

	Used to Match?	
	Yes	No/Not available
Student data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):		
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4D_1A THROUGH C4D_1U UNANSWERED For each Medicaid data element, please indicate whether it is used for matching.

(R = 1 OR 2) AND C1_3 = 1 AND (C4D_1A ^=0 OR C4D_1B ^=0 OR ... OR C4D_1U ^=0)] OR C4D1 = 1

C4d_2 For each Medicaid data element used for matching, please indicate its format and whether missing values are allowed.

c4d2 and
c4d_2a
through
c4d_3u

Medicaid data formats and missing value rules are both identical to those used with SNAP..... 1 GO TO C4E_1

	C4d_2: Format?	C4d_3: Missing Values Allowed?	
		Yes	No
Student data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City		1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4D_2A THROUGH C4D_3U UNANSWERED For each Medicaid data element, used for matching, please indicate its format and whether missing values are allowed.

(R = 1 OR 2) AND C1_4 = 1

C4e_1 For each foster care system data element listed below, please indicate whether it is used for matching.

c4e1 and
c4e_1a
through
c4e_1u

Foster care system data elements are identical to those used with SNAP 1 GO TO C4E_2

	C4e_1: Used to Match?	
	Yes	No/Not available
<i>Student data elements:</i>		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<i>Parent data elements:</i>		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<i>Student, parent, or other data elements (specify):</i>		
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4E_1A THROUGH C4E_1U UNANSWERED For each foster care system data element, please indicate whether it is used for matching.

(R = 1 OR 2) AND C1_4 = 1 AND (C4E_1A ^=0 OR C4E_1B ^=0 OR ... OR C4E_1U ^=0)] OR C4E1 = 1

C4e_2 For each foster care system data element used for matching, please indicate its format and whether missing values are allowed.

c4e2 and
c43_2a
through
c4e_3u

Foster care system data formats and missing value rules are both identical to those used with SNAP 1 GO TO C4F_1

	C4e_2: Format?	C4e_3: Missing Values Allowed?	
		Yes	No
Student data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City		1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4E_2A THROUGH C4E_3U UNANSWERED For each foster care system data element, used for matching, please indicate its format and whether missing values are allowed.

(R = 1 OR 2) AND C1_5 = 1

FILL = C1_5_SPEC

C4f_1 For each [FILL FROM C1 OTHER SPECIFY] data element listed below, please indicate whether it is used for matching.

c4f1 and
c4f_1a
through
c4f_1u

[FILL FROM C1 OTHER SPECIFY] data elements
are identical to those used with SNAP 1 GO TO C4F_2

	Used to Match?	
	Yes	No/Not available
Student data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):		
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4F_1A THROUGH C4F_1U UNANSWERED For each data element, please indicate whether it is used for matching.

(R = 1 OR 2) AND C1_5 = 1 AND (C4F_1A ^=0 OR C4F_1B ^=0 OR ... OR C4F_1U ^=0)] OR C4F1 = 1

FILL = C1_5_SPEC

C4f_2 For each [FILL FROM C1 OTHER SPECIFY] data element used for matching, please indicate its format and whether missing values are allowed.

c4f2 and
c4f_2a
through
c4f_3u

[FILL FROM C1 OTHER SPECIFY] data formats and missing value rules are both identical to those used with SNAP 1 GO TO D1

	C4f_2: Format?	C4f_3: Missing Values Allowed?	
		Yes	No
Student data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City		1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1-3	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	1, 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name		1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1, 2, 4-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1-10	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF ANY OF C4F_2A THROUGH C4F_3U UNANSWERED For each data element, used for matching, please indicate its format and whether missing values are allowed.

D. DATA-MATCHING CHARACTERISTICS

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL = “do most districts in your state”

Else FILL = “does your district”

Format as a drop-down box with digits 1 – 12.

D1 During which month [do most districts in your State/does your district] start the school year?

d1

|_|_|

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

D2a When did or when will the initial match of student enrollment data against the program data for SY 2011–2012 be performed?

d2a

Before the start of the current school year 1

During the current school year 2

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

Format as a drop-down box with digits 1 – 12.

D2b When was or when will be the month of the initial match?

d2b

|_|_|

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

D3 Does this initial match include students who are newly enrolled since the previous school year?

d3

Yes 1

No 0

(R = 1 OR 3 OR 4) OR (R=2 AND A1A = 1)

D4 Does the initial match for direct certification involve a computer match or a manual match?

d4

MARK ONLY ONE

Manual match 1

Computer match 2

HARD CHECK: IF UNANSWERED Please select a response before proceeding.

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

D5a_1 Some States or districts apply matching rules in a series of steps, whereas others apply only one set of rules. The following grid allows you to indicate whether certain data elements are required or allowed to be included under the first matching rule. For example, if your agency requires an exact match on SSN plus exact matches on two additional elements, SSN should be marked as “must be used in match,” while all additional elements should be marked as “might be used in match.” (Later, we will ask about the minimum number of elements required for a match. We will also ask about any additional combinations of data elements used for matching.)

d5a_1_1
through
d5a_1_27

If your agency bases direct certification on a score that indicates how likely the match is to be accurate – sometimes called probabilistic matching – mark all items included in the score as “must be used in match.” (We will ask about creating match scores later.)

	First Set of Data Elements (Primary Identifiers)		
	Must Be Used in Match	Might Be Used in Match	Not Used/Not Available
Student data elements:			
SSN	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic first name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic middle name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic first name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic middle name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
<input type="text"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<input type="text"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<input type="text"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF D5A_1_1 THROUGH D5A_1_24 UNANSWERED For each element, please indicate whether it must or might be used as a primary identifier, or whether it is not used/not available.

$[(R = 1 \text{ OR } 3 \text{ OR } 4) \text{ OR } (R = 2 \text{ AND } A1A = 1)] \text{ AND } (D5A_1_1 \neq 0 \text{ OR } D5A_1_2 \neq 0 \text{ OR } \dots \text{ OR } D5A_1_25 = 1 \text{ OR } 2 \text{ OR } D5A_1_26 = 1 \text{ OR } 2 \text{ OR } D5A_1_27 = 1 \text{ OR } 2)$

D5a_2 For each data element that is required or allowed to be included under the first matching rule, please indicate whether an exact match is required or if a near match is allowed. If your agency bases direct certification on probabilistic matching, mark all items included in the score as “inexact match allowed.”

*d5a_2_1
through
d5a_2_27*

	Exact Match Required	Inexact or Near Match Allowed
Student data elements:		
SSN	0 <input type="checkbox"/>	1 <input type="checkbox"/>
First name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic first name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Middle name / initial	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic middle name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Date of birth	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Gender	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Street address	0 <input type="checkbox"/>	1 <input type="checkbox"/>
City	0 <input type="checkbox"/>	1 <input type="checkbox"/>
County code	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Zip code	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Phone number	0 <input type="checkbox"/>	1 <input type="checkbox"/>
School name / ID	0 <input type="checkbox"/>	1 <input type="checkbox"/>
SNAP or other program ID	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Parent data elements:		
SSN	0 <input type="checkbox"/>	1 <input type="checkbox"/>
First name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic first name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Middle name / initial	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic middle name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Date of birth	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Student, parent, or other data elements (specify):		
<input type="text"/>	0 <input type="checkbox"/>	1 <input type="checkbox"/>
<input type="text"/>	0 <input type="checkbox"/>	1 <input type="checkbox"/>
<input type="text"/>	0 <input type="checkbox"/>	1 <input type="checkbox"/>

SOFT CHECK: IF D5A_2_1 THROUGH D5A_2_24 UNANSWERED For each element used as a primary identifier, please indicate whether an exact match is required or an inexact match is allowed.

ALL

D5b Must a minimum number of elements be matched in order for a student to be directly certified?
d5b

MARK ONLY ONE

- No 0
- Yes, minimum of 2 elements 1
- Yes, minimum of 3 elements 2
- Yes, minimum greater than 3 elements 3

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

D5c Does your agency create a number or score indicating either the strength of the match or how likely the match is to be accurate? This type of score is sometimes referred to as probabilistic matching.
d5c

MARK ONLY ONE

- Yes 1
- No 0 GO TO D6A

(R = 1 OR 2 OR 3) AND (D5C=1 OR .M)

D5d How do you use the score indicating the strength of the match or how likely the match is to be accurate (probabilistic matching)?

*d5d_1 and
d5d_2*

MARK ALL THAT APPLY

Students are directly certified if scores are above a certain threshold 1

Students are classified as potential matches to be examined further if scores are above a certain threshold..... 2

(R = 1 OR 2) AND (D5D_1=1 OR .M)

IF D5D_1 = 1 AND D5D_2 = 1, PLEASE DISPLAY D5E AND D5F ON THE SAME SCREEN

D5e Please describe how you use the score indicating how likely the match is to be accurate (probabilistic matching) to directly certify students.

d5e

(R = 1 OR 2) AND D5D_2=1

IF D5D_1=1 AND D5D_2=1, PLEASE DISPLAY D5E AND D5F ON THE SAME SCREEN

D5f Please describe how you use the score indicating how likely the match is to be accurate (probabilistic matching) to generate a list of potential matches.

d5f

(R = 1 OR 3) OR (R = 2 AND A1A = 1)

If R = 1 or (R = 2 AND A1A = 1) then SHOW = "Yes, further examination of potential matches is conducted by State staff"

D6a **Some matching systems identify a list of potential matches between students and program records. These potential matches typically do not meet the criteria for identifying a definite match, but do have some common identifiers. Do you have a process for identifying and investigating potential, but not definite, matches between students and program records?**

*d6a and
d6a_spec*

MARK ONLY ONE

- No, the matching process does not generate a list of potential matches..... 1
 - [Yes, further examination of potential matches is conducted by State staff.....2]
 - Yes, further examination of potential matches is conducted by district staff..... 3
 - Other (specify) 4
- _____

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

D6b **When there are children in the program data who, based on the primary identifiers you indicated earlier, do not match the student enrollment data, do you conduct further matching based on additional combinations of data elements?**

d6b

MARK ONLY ONE

- Yes 1
- No 0 GO TO D6e

[(R = 1 OR 3 OR 4) OR (R=2 AND A1A = 1)] AND (D6B = 1 OR .M)

D6c Does the process for matching additional combinations of data elements use a manual match, computer match, or both?

d6c_1 and
d6c_2

MARK ALL THAT APPLY

Manual match 1

Computer match 2

[(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)] AND (D6B = 1 OR .M)

D6d_1 What additional combinations of data elements (secondary identifiers) are used for children not directly certified with the first set of data elements (primary identifiers)? If multiple sets of data elements are used in separate steps, please mark all of the elements used in any combination.

d6d_1_1
through
d6d_1_27

	Additional Combination of Data Elements (Secondary Identifiers)		
	Must Be Used in Match	Might Be Used in Match	Not Used/Not Available
Student data elements:			
SSN	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic first name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic middle name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic first name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic middle name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
<input type="text"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<input type="text"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
<input type="text"/>	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF D6D_1_1 THROUGH D6D_1_24 UNANSWERED For each element, please indicate whether it must or might be used as a secondary identifier, or whether it is not used/not available.

$[(R = 1 \text{ OR } 3 \text{ OR } 4) \text{ OR } (R = 2 \text{ AND } A1A = 1)] \text{ AND } (D6B = 1 \text{ OR } .M) \text{ AND } (D6D_1_1 \neq 0 \text{ OR } D6D_1_2 \neq 0 \text{ OR } \dots \text{ OR } D6D_1_25 = 1 \text{ OR } 2 \text{ OR } D6D_1_26 = 1 \text{ OR } 2 \text{ OR } D6D_1_27 = 1 \text{ OR } 2)$

D6d_2 For each data element used as a secondary identifier, please indicate whether an exact match is required or if an inexact match is allowed.

d6d_2_1
through
d6d_2_27

	Exact Match Required	Inexact or Near Match Allowed
Student data elements:		
SSN	0 <input type="checkbox"/>	1 <input type="checkbox"/>
First name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic first name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Middle name / initial	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic middle name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Date of birth	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Gender	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Street address	0 <input type="checkbox"/>	1 <input type="checkbox"/>
City	0 <input type="checkbox"/>	1 <input type="checkbox"/>
County code	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Zip code	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Phone number	0 <input type="checkbox"/>	1 <input type="checkbox"/>
School name / ID	0 <input type="checkbox"/>	1 <input type="checkbox"/>
SNAP or other program ID	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Parent data elements:		
SSN	0 <input type="checkbox"/>	1 <input type="checkbox"/>
First name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic first name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Middle name / initial	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic middle name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Date of birth	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Student, parent, or other data elements (specify):		
_____	0 <input type="checkbox"/>	1 <input type="checkbox"/>
_____	0 <input type="checkbox"/>	1 <input type="checkbox"/>
_____	0 <input type="checkbox"/>	1 <input type="checkbox"/>

SOFT CHECK: IF D6D_2_1 THROUGH D6D_2_24 UNANSWERED For each secondary identifier, please indicate whether an exact match is required or if an inexact match is allowed.

[(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)] AND D6B = 0

D6e What process is used when there are children in the program data who do not match the student enrollment data based on any data elements used for matching?

d6e_1
through
d6e_3_spec

MARK ALL THAT APPLY

No additional steps taken..... 1

Letter is sent to parent(s) of unmatched children in the program data..... 2

Other (specify) 3

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

D7a What process is used when there are two or more children in the student enrollment data that match one child in the program data (that is, duplicate matches)?

d7a_1
through
d7a_6_spec

MARK ALL THAT APPLY

Identify both/all students as matches 1 GO TO D8a

Identify none of the students as matches 2 GO TO D8a

Send letter to students' parents..... 3 GO TO D8a

Use additional information to determine which student matches the program data..... 4

Duplicate matches do not occur 5 GO TO D8a

Other (specify) 6 GO TO D8a

[(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)] AND (D7A = 4 OR .M)

D7b_1 Please indicate the additional set of data elements that are used to determine which student matches the program data in cases in which there are two or more children in the student enrollment data that match one child in the program data (that is, duplicate matches).

d7b_1_1
through
d7b_1_27

	Additional Set of Data Elements (Duplicate Identifiers)		
	Must Be Used in Match	Might Be Used in Match	Not Used/Not Available
Student data elements:			
SSN	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic first name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic middle name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
SNAP or other program ID	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:			
SSN	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic first name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic middle name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Partial or phonetic last name	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):			
_____	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	2 <input type="checkbox"/>	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF D7B_1_1 THROUGH D7B_1_24 UNANSWERED For each element, please indicate whether it must or might be used to match duplicate records, or whether it is not used/not available.

[(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)] AND (D7A = 4 OR .M) AND (D7A_1_1 ^= 0 OR D7A_1_2 ^=0 OR ... OR D7A_1_25 = 1 OR 2 OR D7A_1_26 = 1 OR 2 OR D7A_1_27 = 1 OR 2)

D7b_2 For each data element used for duplicate matches, please indicate whether an exact match is required or if an inexact match is allowed.

d7b_2_1
through
d7b_2_27

	Exact Match Required	Inexact or Near Match Allowed
Student data elements:		
SSN	0 <input type="checkbox"/>	1 <input type="checkbox"/>
First name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic first name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Middle name / initial	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic middle name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Date of birth	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Gender	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Street address	0 <input type="checkbox"/>	1 <input type="checkbox"/>
City	0 <input type="checkbox"/>	1 <input type="checkbox"/>
County code	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Zip code	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Phone number	0 <input type="checkbox"/>	1 <input type="checkbox"/>
School name / ID	0 <input type="checkbox"/>	1 <input type="checkbox"/>
SNAP or other program ID	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Parent data elements:		
SSN	0 <input type="checkbox"/>	1 <input type="checkbox"/>
First name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic first name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Middle name / initial	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic middle name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Partial or phonetic last name	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Date of birth	0 <input type="checkbox"/>	1 <input type="checkbox"/>
Student, parent, or other data elements (specify):		
	0 <input type="checkbox"/>	1 <input type="checkbox"/>
	0 <input type="checkbox"/>	1 <input type="checkbox"/>
	0 <input type="checkbox"/>	1 <input type="checkbox"/>

SOFT CHECK: IF D7B_2_1 THROUGH D7B_2_24 UNANSWERED For each element used to match duplicate records, please indicate whether an exact match is required or if an inexact match is allowed.

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

D8a Does direct certification matching of student enrollment data with program data take place more than once during the school year?

d8a

Yes 1

No 0 GO TO D9

D8A = 1 OR .M

D8b After the initial match, how frequently are subsequent matches performed?

*d8b and
d8b_spec*

MARK ONLY ONE

Ongoing, real-time updates 1

Weekly 2

Monthly 3

Quarterly 4

Three times per year 5

Twice per year 6

Once per year 7

Other (specify) 8

D8A = 1 OR .M

D8c For subsequent matches, what student enrollment data are matched against the program data provided by the State?

*d8c_1 through
d8c_5_spec*

MARK ALL THAT APPLY

Data on students newly enrolled since last data match via individual look-up 1

Data on students newly enrolled since last data match via batch process 2

All student enrollment data via batch process 3

Enrollment data for all students not previously certified via batch process 4

Other (specify) 5

D8A = 1 OR .M

D8d Are subsequent matches based on the same data elements and matching rules that are used for the first match?

d8d

Yes 1
No 0

[R = 1 OR (R = 2 AND A1A = 1)] AND (D8A = 1 OR .M)

D8e Who has primary responsibility for performing the subsequent matches?

d8e

State 1
District..... 2

R = 1 OR (R = 2 AND A1A = 1)

D9 How are direct certification match results communicated to districts?

d9_1
through
d9_5_spec

MARK ALL THAT APPLY

Hard-copy lists are sent via mail 1
Data disks are sent via mail 2
Electronic files are sent via email 3
Results are posted on the Internet for download 4
Other (specify) 5

(R = 1 OR 3) OR (R = 2 AND A1A = 1)

D10 How many children were directly certified in the initial match for school year 2011-2012?

d10_1 and
d10_2

|_|_|_|_|_|_|_| NUMBER

Initial match for 2011-2012 has not yet been performed 1
This information is not collected 2

(R = 1 OR 3) OR (R = 2 AND A1A = 1)

If R = 1 or 2 then FILL = "agency"

Else FILL = "district"

D11a Does your [agency/district] calculate a direct certification match rate (that is, the percentage of children participating in eligible programs who were directly certified)?

d11a

Yes 1

No 0 GO TO D12

D10_1 ≥ 0 AND (D11A = 1 OR .M)

If R = 1 or 2 then FILL1 = "States" and FILL2 = "State's"

Else FILL1 = "districts" and FILL2 = "district's"

D11b When calculating match rates for direct certification, [States/districts] may have different age ranges in the program data that they use. For example, some might have only school-age children, some might have ages from birth to 21, and others might have people of all ages. Which of the following age groups are included in the program data used to calculate your [State's / district's] match rate?

d11b_1
through
d11b 4 spec

	Included in Data to Calculate Match Rate	Not Included in Data to Calculate Match Rate
Ages from birth up to school entry	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Ages from school entry up to high school graduation	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Ages from high school graduation and older	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Other (specify) _____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

D10_1 ≥ 0 AND (D11A = 1 OR .M)

D11c How many children were in the program data used for the initial match for school year 2011-2012? This would be the number used to calculate the direct certification match rate. (If children were included in the data from more than one program, only count each child once.)

d11c

_____|_____|_____|_____|_____|_____|_____| NUMBER

SOFT CHECK: IF LT D10_1 You reported directly certifying more children than were in the program data. Please verify your responses.

(R = 1 OR 2) AND D10_1 ≥ 0 AND (D11A = 1 OR .M)

D12 How does the direct certification match rate you calculate typically compare to the direct certification performance measure reported in the FNS report to Congress called *Direct Certification in the National School Lunch Program: State Implementation Progress*?

d12

- Performance measure is typically about the same as the direct certification match rate..... 1
- Performance measure is typically higher than the direct certification match rate 2
- Performance measure is typically lower than the direct certification match rate 3
- Performance measure is sometimes higher and sometimes lower than the direct certification match rate..... 4
- Don't know d

(R = 1 OR 3) OR (R = 2 AND A1A = 1)

D13 Is there anything else you would like to share about your direct certification matching process?

d13

E. METHODS OF LINKING CHILDREN IN THE SAME HOUSEHOLD

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

E1a Please indicate how the direct certification process is identifying additional children in a household and directly certifying them in accordance with FNS' policy, "Extending Categorical Eligibility to Additional Children in a Household," effective for SY 2009–2010.

e1a_1
through
e1a_5

MARK ALL THAT APPLY

Notification letters have been modified to inform parents about eligibility of other children 1

All students with same parent's name as a categorically eligible child are directly certified 2

All students with same address as a categorically eligible child are directly certified..... 3

Other (specify) 4

No changes have been made to extend categorical eligibility 5 GO TO E2a

[(R = 1 OR 3) OR (R = 2 AND A1A = 1)] AND (E1A ^ 5)

E1b What barriers or challenges were faced in implementing the policy to extend categorical eligibility to additional children in a household?

e1b_1 to
e1b_5

MARK ALL THAT APPLY

Interpreting the eligibility policy 1

Developing a process for identifying children in the same household 2

Lack of technological resources available to allow for electronic identifying of children in the same household 3

Other (specify) 4

No barriers or challenges to implementation 0 GO TO E2a

[(R = 1 OR 3) OR (R = 2 AND A1A = 1)] AND (E1B ^= 0)

E1c What measures were taken to overcome those barriers?

e1c

(R = 1 OR 3 OR 4) OR (R = 2 AND A1A = 1)

If E1a = 5 or then FILL = ""

Else FILL = "additional"

E2a Are there plans to make any [additional] changes to extend categorical eligibility to all children in a household?

e2a

MARK ONLY ONE

- No plans 1 GO TO F1
- Yes, for school year 2012-2013 2
- Yes, after school year 2012-2013 3
- Yes, but no date set 4
- Don't know d GO TO F1

[(R = 1 OR 3) OR (R = 2 AND A1A = 1)] AND (E2A ^= 1 OR D)

E2b What changes are planned to make to extend categorical eligibility to all children in a household?

e2b_1
through
e2b_4_spec

MARK ALL THAT APPLY

- Develop a notification process to inform parents about eligibility of other children 1
- Directly certify all students with same parent's name as a categorically eligible child 2
- Directly certify all children at the same address at which at least one child is categorically eligible 3
- Other (specify) 4

F. NON-PUBLIC SCHOOLS

R = 1 OR 2 OR 3

F1a Do charter schools participate in the direct certification process?

f1a

MARK ONLY ONE

- Yes, all charter schools 1
- Yes, some charter schools 2
- No, charter schools do not participate 3
- No, there are no charter schools 4

R = 1 OR 2 OR 3

If R = 3 then SHOW "No, there are no private schools"

F1b Do private schools participate in your direct certification process?

f1b

MARK ONLY ONE

- Yes, all private schools 1
- Yes, some private schools 2
- No, private schools do not participate 3
- [No, there are no private schools 4]

(R = 1 OR 2 OR 3) AND [(F1A = 2 OR 3 OR .M) OR (F1B = 2 OR 3 OR .M)]

F1c Why don't all non-public schools (NPSs) participate in the direct certification process?

*f1c_1 through
f1c_spec*

MARK ALL THAT APPLY

- No access to non-public school student enrollment data 1
 - State does not require non-public schools to participate in direct certification 2
 - Too few non-public school students likely to be eligible 3
 - Other (specify) 4
- _____

(R = 1 OR 2 OR 3) AND (F1A = 1 OR 2 OR .M)

F2a **What is the direct certification process for charter schools that participate in direct certification?**

*f2a_1
through
f2a_6_spec*

MARK ALL THAT APPLY

- Charter schools submit student enrollment data to State for data matching 1
- Charter schools use a State-maintained web-based individual student look-up system 2
- Charter schools submit data to nearby districts for data matching 3
- Charter schools access statewide program data and perform data match themselves 4 GO TO F3a
- Charter schools access local program data and perform data match themselves 5 GO TO F3a
- Other (specify) 6

(R = 1 OR 2) AND (F2A_4 ^=1 OR F2A_5 ^= 1)

F2b **Are the matching criteria for direct certification the same for charter schools as for public school districts?**

f2b

MARK ONLY ONE

- Yes 1
- No 0
- Varies by district..... 2

(R = 1 OR 2 OR 3) AND (F1B = 1 OR 2 OR .M)

F3a **What is the direct certification process for private schools that participate in direct certification?**

*f3a_1
through
f3a_6_spec*

MARK ALL THAT APPLY

- Private schools submit student enrollment data to State for data matching 1
 - Private schools use a State-maintained web-based individual student look-up system 2
 - Private schools submit data to nearby districts for data matching 3
 - Private schools access statewide program data and perform data match themselves 4 GO TO G1a
 - Private schools access local program data and perform data match themselves 5 GO TO G1a
 - Other (specify) 6
- _____

(R = 1 OR 2) AND (F3A_4 ^= 1 OR F3A_5 ^= 1)

F3b **Are the matching criteria for direct certification the same for private schools as for public school districts?**

f3b

MARK ONLY ONE

- Yes 1
- No 0
- Varies by district..... 2

IF (R = 2 AND A1B = 1) OR D4 = 1 GO TO H1A
ELSE GO TO G1A

G. DATA MATCH SYSTEM

[(R = 1 OR 3) OR (R = 2 AND A1A = 1)] AND D4 = 2

G1a Who developed the software and data systems used for direct certification?

*g1a_1
through
g1a_7_spec*

MARK ALL THAT APPLY

- State child nutrition information technology (IT) staff.... 1
 - State IT staff from agencies other than child nutrition... 2
 - Other State staff..... 3
 - District IT staff..... 4
 - Other district staff..... 5
 - Outside contractor..... 6
 - Other (specify) 7
-

[(R = 1 OR 3) OR (R = 2 AND A1A = 1)] AND D4 = 2

If R = 1 or 2 then FILL1 = "your agency's"

Else FILL1 = "your district's"

G1b What was the funding source for developing your [agency's/district's] current direct certification system?

*g1b_1
through
g1b_6_spec*

MARK ALL THAT APPLY

- Federal grant 1
 - Other grant..... 2
 - State child nutrition operating funds 3
 - Other State funds..... 4
 - District funds 5
 - Other (specify) 6
-

[(R = 1 OR 3) OR (R = 2 AND A1A = 1)] AND D4 = 2

If R = 1 or 2 then FILL = "agency's"
Else FILL = "district's"

If R = 1 or 2 then SHOW = "State child nutrition staff"
If R = 1 or 2 then SHOW = "State education agency staff"
If R = 1 or 2 then SHOW = "Other State staff"
If R = 3 then SHOW = "District staff"

G2a Who maintains your [agency's/district's] direct certification software/system tool and performs data matching?
g2a

MARK ONLY ONE

- [State child nutrition staff..... 1]
- [State education agency staff..... 2]
- [Other State staff..... 3]
- [District staff 4]
- Outside contractor..... 5

[(R = 1 OR 3) OR (R = 2 AND A1A = 1)] AND D4 = 2

G2b What software do you use to perform computer data matching?
g2b and g2b_spec

MARK ONLY ONE

- Commercial, off-the-shelf data-matching software (SAS, other data profiling tools) 1
 - Third-party software developed specifically for direct certification 2
 - Software developed in-house specifically for direct certification 3
 - Microsoft Office tools (Access or Excel) 4
 - Other (specify) 5
- _____

H. FEASIBILITY/EFFECTIVENESS OF DATA-MATCHING SYSTEMS

R = 1 OR 2

H1a Has any analysis been conducted on the costs and effectiveness of computer matching for direct certification in your State?

h1a

Yes 1
 No 0 GO TO H2

(R = 1 AND D4 = 1 AND H1A ^= 0) OR (R = 2 AND H1A ^= 0)

H1b Did this analysis determine that computer matching was not cost effective in your State?

h1b

Yes 1
 No 0

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL1 = "agency"
 Else FILL1 = "district"

If R = 1 or 2 then SHOW "Other State agencies"
 If R = 3 then SHOW "State child nutrition agency"

H2 With which of the following organizations has your [agency/district] talked regarding the technical and logistical requirements of computer matching for direct certification?

*h2_1
 through
 h2_7*

MARK ALL THAT APPLY

[Other State agencies 1]
 [State child nutrition agency 2]
 Contractors 3
 IT staff..... 4
 Regional office 5
 Other districts..... 6
 None of the above..... 0

IF (A1E = 1 OR 2) GO TO I1A

R = 1 OR 2

H3 Have any other States contacted your agency about adopting elements of your State's direct certification practices?

h3

Yes 1

No 0

I. BARRIERS

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL = "State"

Else FILL = "district"

I1a In your opinion, what issues related to enrollment records are barriers to improving the use of data matching for direct certification in your [State/district]?

*i1a_1
through
i1a_7_spec*

MARK ALL THAT APPLY

- No barriers related to enrollment records 1
- The State agency does not maintain a database of students 2
- The State's database of students does not have sufficient information to support computer matching (for example, no SSNs)..... 3
- The State's database of students is not updated with fall enrollment data in time for direct certification..... 4
- It takes too long to obtain student enrollment data files from all districts..... 5
- Naming conventions in enrollment database are not consistent with data in other systems..... 6
- Other barrier related to enrollment records (specify) 7

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL1 = "State"
Else FILL1 = "district"

If R = 1 or 2 then FILL2 = "agency" and FILL3 = "agency" and FILL4 = "agency"
Else FILL2 = "district" and FILL3 = "district" and FILL4 = "district"

If C1_1 = 1 then SHOW "The TANF agency does not keep records in a manner that makes it cost-effective for your [agency/district] to use computer matching"

If C1_1 = 1 then SHOW "It's too difficult to get data files from the TANF agency"

If C1_1 = 1 then SHOW "The TANF agency won't agree to perform the match"

11b In your opinion, what issues related to program participation are barriers to improving the use of data matching for direct certification in your [State/district]?

*i1b_1
through
i1b_11_spec*

MARK ALL THAT APPLY

- No barriers related to program participation 1
 - The SNAP agency does not keep records in a manner that makes it cost-effective for your [agency/district] to use computer matching 2
 - [The TANF agency does not keep records in a manner that makes it cost-effective for your [agency/district] to use computer matching 3]
 - Agencies other than SNAP with relevant program data do not keep records in a manner that makes it cost-effective for your [agency/district] to use computer matching 4
 - It's too difficult to get data files from the SNAP agency 5
 - [It's too difficult to get data files from the TANF agency 6]
 - It's too difficult to get data files from agencies with relevant program data other than SNAP 7
 - The SNAP agency won't agree to perform the match... 8
 - [The TANF agency won't agree to perform the match.. 9]
 - Agencies other than SNAP with relevant program data won't agree to perform the match..... 10
 - Other barrier related to program participation (specify) 11
-

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL = "State"

Else FILL = "district"

I1c

*i1c_1
through
i1c_8_spec*

In your opinion, what issues related to resources or other factors are barriers to improving the use of data matching for direct certification in your [State/district]?

MARK ALL THAT APPLY

- No barriers related to resources or other factors 1
 - Staff not available at the State level to perform the work required for computer matching for direct certification..... 2
 - Funds are not available to pay to train State staff to do the work required for computer matching 3
 - Computer resources not available at the State level to conduct the computer matching process..... 4
 - Concerned about how State-level computer matching would compromise student confidentiality 5
 - Percentage of students eligible for free meals is too small to make computer matching for direct certification worthwhile 6
 - State regulations prohibit use of student records for this purpose 7
 - Other barrier related to resources or other factors(specify) 8
- _____

IF (A1E = 1 OR 2) GO TO K1

R = 1 OR 2 OR 3

If R = 1 OR A1A = 1 then FILL = "improving"

Else FILL = "greater use of district-level"

I2a To what extent are the following barriers to [improving / greater use of district-level] computer matching for direct certification of public school students?

i2a_a
through
i2a_e_spec

	NOT AT ALL A BARRIER				A SIGNIFICANT BARRIER
a Cost of computer software....	1	2	3	4	5
b Lack of technical expertise ...	1	2	3	4	5
c Student enrollment data are not suitable for computer matching	1	2	3	4	5
d No perceived need for computer matching.....	1	2	3	4	5
e Other (specify): _____	1	2	3	4	5

R = 1 OR 2 OR 3

If R = 1 OR A1A = 1 then FILL = "improving"

Else FILL = "greater use of district level"

I2b To what extent are the following barriers to [improving / greater use of district-level] computer matching for direct certification of non-public school students?

i2b_a
through
i2b_e_spec

	NOT AT ALL A BARRIER				A SIGNIFICANT BARRIER
a Cost of computer software....	1	2	3	4	5
b Lack of technical expertise ...	1	2	3	4	5
c Student enrollment data are not suitable for computer matching	1	2	3	4	5
d No perceived need for computer matching.....	1	2	3	4	5
e Other (specify): _____	1	2	3	4	5

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL = "districts"

Else FILL = "your district"

I3 Did [districts/your district] have to implement any technology upgrades to use direct certification?

i3

Yes 1

No 0

R = 1 OR 2 OR 3

I4 Did district staff have to undergo any additional training to use direct certification?

i4

Yes 1

No 0

J. DIRECT CERTIFICATION GRANTS

R = 1 OR 2

J1a Did your State receive a direct certification grant awarded by the Food and Nutrition Service?

j1a

Yes 1
 No 0 GO TO K1

J1A ^= 0

J1b In what year was the direct certification grant awarded? *(If your State has received more than one direct certification grant, please report the most recent one.)*

j1b

ENTER 4-DIGIT YEAR

|_|_|_|_|

SOFT CHECK: IF J1B LT 1990 OR GT 2011 Please check your response.

J1A ^= 0

J1c What specific changes to your agency's direct certification process have been made or are currently underway as a result of the direct certification grant?

*j1c_1
 through
 j1c_8_spec*

MARK ALL THAT APPLY

- Upgraded the State information systems 1
- Obtained data from other programs in addition to SNAP 2
- Implemented a new computer matching system 3
- Increased the frequency of data matching 4
- Added more elements for data matching..... 5
- Upgraded matching system algorithm to incorporate probabilistic matching techniques 6
- Created a web-based look-up system 7
- Other (specify) 8

J1d

What additional changes are planned as a result of the direct certification grant?

*j1d_1
through
j1d_8_spec*

MARK ALL THAT APPLY

- No additional changes planned 0
- Upgrade the State information systems 1
- Obtain data from other programs in addition to SNAP.. 2
- Implement a new computer matching system 3
- Increase the frequency of data matching 4
- Add more elements for data matching..... 5
- Upgrade matching system algorithm to incorporate probabilistic matching techniques 6
- Create a web-based look-up system 7
- Other (specify) 8

K. PLANNED CHANGES/EMERGING APPROACHES

R = 1 OR (R = 2 AND A1B = 0)

If J1a = 0 then FILL = ""
Else FILL = "additional"

If A1B = 1 or A1C = 1 then SHOW "Increase the frequency of sending program data"
If A1A = 1 then SHOW "Implement computer matching system"
If A1A = 1 then SHOW "Increase the frequency of data matching"
If A1A = 1 then SHOW "Upgrade matching system algorithm to incorporate probabilistic matching techniques"

K1 What [additional] changes, if any, does your agency plan to make to current procedures for direct certification?

*k1_1
through
k1_12*

MARK ALL THAT APPLY

- Upgrade your State information systems 1
- Obtain program participation data in addition to the program data currently used for matching 2
- [Increase the frequency of sending program data 3]
- [Implement a new computer matching system 4]
- [Increase the frequency of data matching 5]
- Add more elements for data matching..... 6
- [Upgrade matching system algorithm to incorporate probabilistic matching techniques 7]
- Implement a process to resolve unmatched records 8
- Create a web-based look-up system 9
- Implement a process to extend categorical eligibility to other children in a household 10
- Other (specify) 11
- _____
- No changes planned 12

(R = 1 OR 2) AND A1A = 0

K2 Do you have any plans to implement State-level matching for direct certification in the future?
k2

Yes 1

No 0

Don't know d

ALL

K3 If you could change anything, how would you improve your direct certification procedures to match a greater number of children for free school meals?
k3

L. POTENTIAL/FEASIBILITY OF USE OF MEDICAID DATA FOR DIRECT CERTIFICATION

R = 1 OR 2

L1 SNAP data can be used for direct certification because SNAP income eligibility criteria are the same as those for free school meals. Income eligibility for Medicaid varies from State to State. In your State, would all children eligible for Medicaid also be eligible for free school meals?

l1

Yes 1
No 0
Don't know d

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL = "agency"

Else FILL = "district"

L2a Will your [agency/district] use Medicaid data to verify NSLP income applications for school year 2011–2012? (*NSLP income applications contain information about household membership and income sources.*)

l2a

Yes 1
No 0 GO TO L3a

(R = 1 OR 2 OR 3) AND L2A ^= 0

If R = 1 or 2 then FILL = "agency"

Else FILL = "district"

L2b Does your [agency/district] use computer matching of Medicaid electronic data to verify NSLP income applications?

l2b

Yes 1 GO TO L3a
No 0

(R = 1 OR 2 OR 3) AND L2B ^= 1

If R = 1 or 2 then FILL = "agency"

Else FILL = "district"

L2c Has your [agency/district] investigated the feasibility of using computer matching with Medicaid data to verify NSLP eligibility?

l2c

Yes 1

No 0

R = 1 OR 2 OR 3

If R = 1 or 2 then FILL = "agency"

Else FILL = "district"

L3a Does your [agency/district] provide data on NSLP certifications for referrals to the Medicaid or State Children's Health Insurance Program?

l3a

Yes 1

No 0

Don't know d

R = 1 OR 2 OR 3

If R = 1 or 2 then SHOW = "Varies by district" and "Don't know"

L3b Does Medicaid participate in a data-matching program of individual records to determine Medicaid reimbursements to school districts?

l3b

MARK ONLY ONE

Yes 1

No 2 END

[Varies by district 3 END]

[Don't know d END]

(R = 1 OR 2 OR 3) AND (L3B = 1 OR .M)

L3c Please indicate the Medicaid data elements that are used for matching to determine Medicaid reimbursements to school districts.

L3c_1
through
L3c_21

Match elements	Used for Matching	Not Used for Matching/Not Available
Student data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Gender	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Street address	1 <input type="checkbox"/>	0 <input type="checkbox"/>
City	1 <input type="checkbox"/>	0 <input type="checkbox"/>
County code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Zip code	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Phone number	1 <input type="checkbox"/>	0 <input type="checkbox"/>
School name / ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Medicaid ID	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Parent data elements:		
SSN	1 <input type="checkbox"/>	0 <input type="checkbox"/>
First name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Middle name / initial	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Last name	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Date of birth	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Student, parent, or other data elements (specify):		
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>
_____	1 <input type="checkbox"/>	0 <input type="checkbox"/>

SOFT CHECK: IF L3C_1 THROUGH L3C_18 UNANSWERED For each element, please indicate whether it is used for matching to determine Medicaid reimbursements to school districts.

End screen

Thank you for completing the survey. Please click on the review missing data button below to see questions with missing responses. You will be able to answer additional questions in each survey section.

- A. Introduction
- B. Enrollment Data Characteristics
- C. Program Data Questions
- D. Data-Matching Characteristics
- E. Methods of Linking Children in the Same Household
- F. Non-Public Schools
- G. Data Match System
- H. Feasibility/Effectiveness of Data-Match Systems
- I. Barriers
- J. Direct Certification Grants
- K. Planned Changes/Emerging Approaches
- L. Potential/Feasibility of Use of Medicaid Data for Direct Certification

Once you have gone through your missing responses, please click the review responses button below. You may review and all of your responses and make any final corrections before submitting your survey.

Submit screen

Thank you for completing the survey. In case we need to follow up with your agency on any of your responses, please provide the name and contact information of the primary person who completed this survey. All contact information will remain confidential and will not be used for any other purposes.

_____(STRING 20)
FIRST NAME

_____(STRING 20)
LAST NAME

_____(STRING 40)
TITLE

_____(STRING 40)
EMAIL ADDRESS

|_|_|_| - |_|_|_| - |_|_|_|_|_|
TELEPHONE NUMBER

REFUSED..... r

If you are satisfied with your responses, please click on the submit button below. Once you submit your survey, you will not be able to make any additional changes. If you need to correct anything, please contact the help desk at [EMAIL ADDRESS] or [TELEPHONE NUMBER] for assistance.

If someone tries to log in to a completed survey:

Thank you for your interest in completing this survey for the NSLP Direct Certification Improvement Study. Someone from your agency submitted responses on [DATE]. If you believe you are getting this message in error, please contact the help desk at [EMAIL ADDRESS] or [TELEPHONE NUMBER] for assistance.