## SUGGESTED INTERVIEWEES FORM

Public reporting burden of this collection of information is estimated to average one hour 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: OMB 0920-XXXX

## **Purpose**

The purpose of Suggested Interviewees Form is to determine in advance individuals who could be interviewed during the site visit. On the form you will identify people who represent the categories of program functions that we are interested in learning about. Because every program uses its own names, terms, and arrangements, the information on the tables will help you to be clear about what types of persons we would like to talk with.

Please return the Suggested Interviewees Form to \_\_\_\_\_ at ICF Macro Inc (insert email address) by (insert date).

After you have returned the Suggested Interviewees Form, an ICF Macro representative will follow up with a call to you to confirm what specific people are to be interviewed. From the list of possible interviewees you provide, we will work with you to set up the number and schedule of interviews that the site visitors will follow during the visit.

- Provide names and affiliation as indicated for each of the categories listed.
- Return the form to ICF Macro by e-mail for review. An ICF Macro representative will arrange a conference call with you and the assigned site visitors to review the list and to ensure that appropriate people have been identified for the interviews.
- After the telephone review, make any needed revisions. An ICF Macro representative will provide you with instructions and a template to assist with confirming each of the selected persons to be interviewed and at what time and location.

involved. List the names	of the persons involved in	ople involved with the program and note how they are the design, delivery, and/or evaluation of the program es with which they are involved.
involved in higher level of securing and managing f	conceptual planning and d unding as well. This persor ay-to-day coordinator (if d	al oversight of the program. This person usually is eveloping the vision for the program, sometimes in usually is in charge of other staff working with the ifferent).
Title/Position	Name	Main Program Involvement
the program closely and	has oversight for the activ activities of the program,	day program manager/coordinator who works with ities of other staff. This category also includes staff such as teachers, coaches, nutritionists, cafeteria
Title/Position	Name	Main Program Involvement
		evaluated by others—either internally or externally ved with conducting the evaluation.
Time Required per Inte	rview: 1 hour	
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Time Required per Inte Title/Position  Partner(s) Programs ma the program activities or people who provide vario	rview: 1 hour Name  y have external partners w its infrastructure in impor	Main Program Involvement  who are not staff of the program but who assist with stant ways. These could be organizations or specific
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