OMB Approval No.: 0584-XXXX

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**Appendix A-1: RECRUITMENT SCRIPT—INTERVIEWS**

*Note: Interview respondents (as identified in consultation with the state or local SNAP director) will be contacted by the Urban Institute (or MEF Associates) to request their cooperation and to arrange a time and location for the interview. A common recruitment script will be used for SNAP administrators, SNAP caseworkers, and CBO directors. The recruitment and reminder scripts assume that, for any given respondent, both contacts are made by the same Urban Institute (or MEF Associates) staff member, one of the interviewers assigned to the site. The contacts are assumed to be telephone calls. The same wording will be used if the contact is made via email.*

**Hello, may I please speak with [RESPONDENT’S NAME]? [Once the respondent is on the call . . .]**

Hello, I’m [NAME], a researcher with the Urban Institute [or MEF Associates], a research organization located in the Washington, DC area. [NAME OF STATE OR LOCAL SNAP DIRECTOR] at the food stamp [SNAP*; name of program to be tailored to specific site*] program suggested that I contact you. I’d like to request your cooperation in a study that we are conducting for the Food and Nutrition Service on churning among SNAP participants. Our study is assessing the causes and costs of participant churning. As part of this study, we will be interviewing SNAP administrators, SNAP caseworkers, and directors of local community-based organizations to get their perspectives on the causes and costs of churn. [NAME OF CITY] is one of six local areas selected as a study site. I am one member of the research team coming to [CITY] on [DATES] to conduct these interviews. We would like to include you in our interviews, if you agree to cooperate. Each interview will take an hour. Your participation in the study is voluntary. We will take notes during the interview, but no individual will be quoted by name in our reports or in any discussions beyond the research team itself.

Are you willing to be interviewed for this study?

[IF YES] Terrific. I’ll add your name now to our interview list. [CONTINUE BELOW WITH “Are you available . . . ?”]

[IF NO] That’s fine. Thank you for letting me tell you about this. Enjoy the rest of your day. Good bye.

Are you available during either of the days when we will be in [CITY]? Those days are [DATES].

[IF YES] Great. What would be the best times for you on those days?

[CONTINUE] Good. I’ve recorded those times. For now, let’s schedule the interview for [DATE and TIME]. Please write down this meeting in your calendar.

[CONTINUE] What is the best location for our interview?

[CONTINUE] Excellent. Prior to that time, I will re-contact you to remind you of the details – the date, time, and location, etc. Enjoy the rest of your day. Good bye.

**RECORD INFORMATION:**

**Name of Respondent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Location of Interview \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Time/Date of Interview \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

[IF NO] That’s unfortunate. I will get back to you after I check with the other members of our research team, to see what other dates and times we might arrange. Enjoy the rest of your day. Good bye.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-XXXX. The time required to complete this information collection is estimated to average 9 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.