

Draft Email to Request Participation in Quitline Services Questionnaire

Dear National Tobacco Control Program Managers,

The Office on Smoking and Health, Centers for Disease Control and Prevention would like to request your participation in a web-based survey of quitline services. The purpose of this survey is to provide data for ongoing quitline evaluation and the evaluation of CDC's ARRA expenditure on quitlines.

This web-based survey has 58 questions. Questions 1-4 ask about basic information on your quitline. Questions 5-53 ask about the services provided by your quitline. Your quitline service provider/vendor should have the best information for these questions. Questions 54-58 ask about how your quitline conducts 7-Month Follow-up evaluation. Your evaluation contractor should have the best information to answer these questions. Your participation is completely voluntary and you can exit the survey at any time. The survey will take approximately 7-10 minutes of your time.

The web-based survey can be accessed using the following link: [insert link here]. If your web browser does not open the survey when you click on the link, open your browser, and copy and paste the web address into the browser. If you have any questions about how to access this survey, please contact xxx at [insert phone number] or [insert email]. Please complete the survey no later than [insert time].

Please take this opportunity to provide your input. This information will help OSH to improve its evaluation technical assistance for quitlines and its understanding of your quitlines intake and follow-up data.

Thank you,

[Name]

Office on Smoking and Health

Centers for Disease Control and Prevention