**Appendix 4: HSLS:09 2013-2014 Panel Maintenance**

## Address Update Paper Form

**High School Longitudinal Study of 2009 (HSLS:09)**

**Address Update Information**

Thank you very much for your participation in the High School Longitudinal Study of 2009 (HSLS:09).  Please take a moment to confirm or update [your/StudentName’s] contact information. We are also requesting that you confirm or update contact information for [your parent/yourself] and provide contact information for one additional person. By updating our records, we will be better able to notify [you/him/her] when it is time for the next round of HSLS:09.  Please remember that all information you provide will be protected.

After you complete this form, please mail it back to RTI International using the enclosed Business Reply Envelope.

This update may also be completed on our secure website at [Website\_Fil] by entering your study id: [ID\_Fill] and password: [PW\_Fill]. You may go online to indicate that the information provided in the form below is correct.

We greatly appreciate your help to make HSLS:09 a continued success!

1. [STUDENTS ONLY] May we send you a text message reminder when data collection begins?[[1]](#footnote-1)

* Yes 🡪 Please enter your cell provider here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No

1. If [your/StudentName’s] current contact information is *not* correct below, please provide the updated contacting information on the right. If the contact information *is* correct, please check the box.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **[Your/StudentName’s] contacting information** | |  | **Corrections and additions** |
|  | Name: | [StudentName] |  |  |
|  | Address: | [StudentAddress] |  |  |
|  | City | [StudentCity] |  |  |
|  | State | [StudentState] |  |  |
|  | ZIP | [StudentZIP] |  |  |
|  | Home phone: | [StudentHome] |  |  |
|  | Work phone: | [StudentWork] |  |  |
|  | Cell phone: | [StudentCell] |  |  |
|  | Primary e-mail address: | [Studentemail1] |  |  |
|  | Alternate e-mail address: | [Studentemail2] |  |  |
| * **Check here if all information is correct** | | | | |

1. Please also provide the contact information for the parent most knowledgeable about [your/StudentName’s] education or career. Please also provide contact information for an additional person who will always know how to get in touch with [you/StudentName].

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Parent information** | |  | **Corrections and additions** |
|  | Name: | [ParentName] |  |  |
|  | Address: | [ParentAddress] |  |  |
|  | City: | [ParentCity] |  |  |
|  | State: | [ParentState] |  |  |
|  | ZIP: | [ParentZIP] |  |  |
|  | Home phone: | [Parenthome] |  |  |
|  | Work phone: | [ParentWork] |  |  |
|  | Cell phone: | [ParentCell] |  |  |
|  | Primary e-mail address: | [Parentemail1] |  |  |
|  | Alternate e-mail address: | [Parentemail2] |  |  |
| * **Check here if all information is correct** | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Other contact information** |  |  |
|  | Name: |  |  |
|  | Address: |  |  |
|  | City: |  |  |
|  | State: |  |  |
|  | ZIP: |  |  |
|  | Home phone: |  |  |
|  | Work phone: |  |  |
|  | Cell phone: |  |  |
|  | Primary e-mail address: |  |  |
|  | Alternate e-mail address: |  |  |

4. [Are you/Is StudentName] currently enrolled in a college, trade school, or other higher education institution?

* Yes 🡪 Please continue with question 5
* No 🡪 You are finished with the address update. Thank you.

5. Please provide the name and address of the college, trade school, or other higher education institution that [you/StudentName] attend. Please do not use abbreviated school names (e.g. use Arizona State University, rather than ASU).

|  |  |  |
| --- | --- | --- |
|  | School Name: |  |

***Thank you in advance for making HSLS:09 a success!***

## Address Update Web Form

**High School Longitudinal Study**

**Web Address Update Information**

Thank you for your participation in the High School Longitudinal Study (HSLS). Please take a moment to update [your/StudentName’s] contact information and [your/StudentName’s] education status. We are also requesting that you provide contacting information for [at least one parent/yourself] and one additional person. By updating our records, we will better be able to notify [you/him/her] when it is time for the next round of HSLS. If the address information we sent you in the mail was correct, please check the appropriate box to indicate it was correct and complete.

Please remember that all information you provide will be protected.

We greatly appreciate your help to make HSLS a continued success!

1. [STUDENTS ONLY] May we send you a text message reminder when data collection begins?[[2]](#footnote-2)

* Yes 🡪 Please enter your cell provider here: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No

1. If [your/StudentName’s] current contact information is not correct below, please provide the updated contacting information on the right. Otherwise, check the box at the bottom to indicate the information is correct and complete.

|  |  |  |
| --- | --- | --- |
|  | **[Your/StudentName’s] contacting information** | |
|  | Name: |  |
|  | Address: |  |
|  | City |  |
|  | State |  |
|  | ZIP |  |
|  | Home phone: |  |
|  | Work phone: |  |
|  | Cell phone: |  |
|  | Primary e-mail address: |  |
|  | Alternate e-mail address: |  |
| * Check here if all information is correct | | |

1. Please also provide the contacting information for the parent most knowledgeable about [your/StudentName’s] education or career. Please also provide contacting information for an additional person who will always know how to get in touch with [you/StudentName].

|  |  |  |
| --- | --- | --- |
|  | **Parent contacting information** | |
|  | Name: |  |
|  | Address: |  |
|  | City: |  |
|  | State: |  |
|  | ZIP: |  |
|  | Home phone: |  |
|  | Work phone: |  |
|  | Cell phone: |  |
|  | Primary e-mail address: |  |
|  | Alternate e-mail address: |  |
| * Check here if all information on the printed form was correct | | |

|  |  |  |
| --- | --- | --- |
|  | **One additional person** |  |
|  | Name: |  |
|  | Address: |  |
|  | City: |  |
|  | State: |  |
|  | ZIP: |  |
|  | Home phone: |  |
|  | Work phone: |  |
|  | Cell phone: |  |
|  | Primary e-mail address: |  |
|  | Alternate e-mail address: |  |

4. [Are you/Is StudentName] currently enrolled in a college, trade school, or other higher education institution?

* Yes 🡪 Please continue with question 5
* No 🡪 You are finished with the address update. Thank you.

5. Please provide the name and address of the college, trade school, or other higher education institution that [you/StudentName] attend. Please do not use abbreviated school names (e.g. use Arizona State University, rather than ASU).

|  |  |  |
| --- | --- | --- |
|  | School Name: |  |

***Thank you in advance for making HSLS a success!***

1. Standard text messaging rates apply. [↑](#footnote-ref-1)
2. Standard text messaging rates apply. [↑](#footnote-ref-2)