I. INTRODUCTION

|  |
| --- |
| All |

This survey is designed to help us estimate the cost of certifying students for free or reduced price meals in both districts that are part of the Direct Certification with Medicaid (DC-M) demonstration and those that are serving as the control group for the evaluation. For this round of the survey, we are asking you to respond for the entire 2012-2013 school year, **as best you can;** the timing of the demonstration was such that we could not collect the data earlier. We divide the year into two periods: (1) July-September 2012, and (2) October 2012-June 2013. For the **first period,** we will ask you to **estimate time or dollars spent on various tasks for the entire period** (three months); for the **second period,** we will ask you to **estimate time spent during a typical month.** We make this distinction because certification activities tend to be focused during the July to September period in many districts. During the 2013-2014 school year, we will collect data bimonthly, in order to improve data quality.

This survey is to be completed by the food service program director or a designated member of staff who has knowledge of certification procedures. **One or more staff in your district may complete the survey; please circulate the survey among appropriate staff, if necessary,** to obtain all responses. In some districts, one staff member may be able to complete the entire survey. In other districts, multiple staff may complete sections. During the survey, we will ask about the following key topics:

* The matching method, steps and individuals involved in conducting **direct certification** in your district, including the number of hours spent on different tasks
* The steps and individuals involved in the **certification by application** process in your district, including the number of hours spent on different tasks
* Salary and benefit levels for relevant categories of staff

Click here to print this survey. 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.

A. DIRECT CERTIFICATION

|  |
| --- |
| All |

**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 public assistance office about participation in the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Food Distribution Program on Indian Reservations (FDPIR), or Medicaid (for districts participating in the Direct Certification – Medicaid demonstration). Direct certification can be implemented at the State or district level.**

**A1. 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 (and/or a list of children in other qualifying programs) using a common identifier or identifiers.**

**Did your State conduct matching at the State level for direct certification in 2012-2013?**

*Var*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| all |

**A2. With district-level matching, districts are responsible for matching a list of children enrolled in their schools with a list of children in SNAP households (and/or in other qualifying programs) using a common identifier or identifiers. Districts may use manual methods or their own computer systems. Did your district conduct matching at the district level for direct certification in 2012-2013?**

*Var*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| a1 = 1 and a2 = 1 |

**A3. Which entity performed matching for direct certification first?**

*Var*

*Select one only*

🔾 State 1

🔾 District 2

NO RESPONSE M

|  |
| --- |
| a1 ne 1 and a2 ne 1  |

**A4. How was direct certification conducted in your district?**

*Var*

*Select one only*

🔾 Direct certification was not used 1

🔾 Other (specify) 2 GO TO B1

Specify (STRING (NUM))

NO RESPONSE M GO TO B1

|  |
| --- |
| a4 = 1 |

**A5. Why was direct certification not conducted in your district?**

*Var*

 (FIELD DESCRIPTION) GO TO C1

(STRING (NUM))

NO RESPONSE M GO TO C1

B. DIRECT CERTIFICATION PROCESS

|  |
| --- |
| ALL |

**The next questions are about the direct certification process in your district.**

**B1. Which levels of staff were involved with the direct certification process?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 Other district-level clerical or administrative staff 7

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| ALL |

**B2. Who was responsible for overseeing the direct certification process in your district during the 2012-2013 school year?**

*Var*

*Select one only*

🔾 District food service director 1

🔾 Superintendent 2

🔾 Business manager 3

🔾 Student database administrator 4

🔾 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX b2ask B3 or b3a for first response selected at B1, then ask follow up question b4 if applicable. then ask B3 or b3a for second response selected at B1, then ask follow up question B4 if applicable. continue loop until B3 or b3a (and follow up) has been asked for each response selected at B1, then go to C1. |

|  |
| --- |
| a2 = 1 and (a1 = 0 or a3 = 2) and B1 NE M |

**B3. In which steps was [JOB TITLE FROM B1] involved?**

*Var*

*Select all that apply*

🞏 Receiving or downloading files from the State Agency of children receiving SNAP, TANF, FDPIR, and/or Medicaid 1

🞏 Updating match specifications, developing programming to implement them, and testing and refining programs 2

🞏 Extracting relevant student data from district files 3

🞏 Updating database to include new fields or change previous fields 4

🞏 Running district-level matching of student data and SNAP, TANF, FDPIR, and/or Medicaid data and identifying matches 5

🞏 Researching close or partial matches 6

🞏 Reviewing remaining lists of SNAP, TANF, FDPIR and other Medicaid eligibles manually to identify additional matches, including siblings of matched students 7

🞏 Merging direct certification results to point-of-sale and/or main student databases or other approaches to making information available to cashiers 8

🞏 Making sure all state and federal regulations are followed 9

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX B3ask b4 for each response selected at b3.  |

|  |
| --- |
| a1 = 1 and (a2 = 0 or a3 = 1) and B1 NE M |

**B3A. In which steps was [JOB TITLE FROM B1] involved?**

*Var*

*Select all that apply*

🞏 Uploading student enrollment files to the state system for matching 1

🞏 Receiving file of matches from the state and reviewing 2

🞏 Researching close or partial matches 3

🞏 Reviewing remaining lists of SNAP, TANF, FDPIR and other Medicaid eligibles manually to identify additional matches, including siblings of matched students 4

🞏 Merging direct certification results to point-of-sale and/or main student databases or other approaches to making information available to cashiers 5

🞏

🞏 Communications with State Agency 6

🞏 Making sure all state and federal regulations are followed 7

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX B3Aask b4 for each response selected at b3A. |

|  |
| --- |
| **(**B3 NE 0 or b3a ne 0) AND (B3 ne m or b3a ne m) |

**B4. How many hours did the [JOB TITLE FROM B1] spend on [TASK FROM B3 AND/OR B3A] during July to September? How many hours in a typical month during the rest of the year? Please include management time.** *(Your best estimate is fine.)*

|  |  |
| --- | --- |
|  | HOURS |
| a. Total hours in July-September period  |  |
| b. Typical Monthly Hours After October 1 |  |

C. CERTIFICATION BY APPLICATION

|  |
| --- |
| all |

**Next, we ask about the certification by application process in your district during school year 2012-2013.**

**C1. Who was responsible for overseeing the certification by application process in your district during the 2012-2013 school year?**

*Select one only*

🔾 District food service director 1

🔾 Superintendent 2

🔾 Business manager 3

🔾 Student database administrator 4

🔾 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M GO TO C3

|  |
| --- |
| c1 ne m |

**C2. What were the main duties of the [RESPONSE FROM C1] in overseeing the certification by application process?**

*Var*

*Select all that apply*

🞏 Supervising district-level steps 1

🞏 Working with principals who supervise school-level steps 2

🞏 Supervising school-level steps directly 3

🞏 Making sure all state and federal regulations are followed 4

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| all |

**C3. Was most of the work involved with certification by application done at the school level or at the district level?**

*Var*

*Select one only*

🔾 Primarily school level 1

🔾 Primarily district level 2

🔾 School level and district level equally 3

NO RESPONSE M

|  |
| --- |
| all |

**C4. Did your district have a web-based application process?**

*Var*

🔾 Yes 1

🔾 No 0 GO TO C11

NO RESPONSE M GO TO C11

|  |
| --- |
| c4 = 1 |

**C5. How long has the web-based application process been in place?**

*Var*

 YEARS AND/OR [SKIP] MONTHS

 (RANGE NUMBER RANGE) (RANGE NUMBER RANGE)

NO RESPONSE M

|  |
| --- |
| c4 = 1 |

**C6. What percentage of applications was received through the web-based process?**

*Var*

 %

 (RANGE NUMBER RANGE)

🔾 Don’t know D

NO RESPONSE M

|  |
| --- |
| c4 = 1 |

**C7. Who managed the web-based application site?** *Please include work on developing and testing the site.*

*Var*

*Select one only*

🔾 District staff manages 1

🔾 Contractor manages 2

🔾 District and contractor manage jointly 3

🔾 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| c7 = 2 or c7 = 3 |

**C8. How much money was paid to the contractor each period for managing the web-based application site?** *(Your best estimate is fine.)*

*Var*

|  |  |
| --- | --- |
|  | DOLLARS |
| a. Cost in July-September 2012 | $ |
| b. Average Monthly Cost After October 1, 2012 | $ |

NO RESPONSE M

|  |
| --- |
| c7=1 or c7=3 |

**C9. Who at the district worked on managing the web-based application site?** *Please include work on developing and testing the site.*

*Select all that apply*

*Var*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C11

NO RESPONSE M GO TO C11

|  |
| --- |
| c9 ne m |
| FILL response options (a-h) from responses selected at c9 |
| FILL RESPONSE options i and j FROM C9oth\_specify;IF C9oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C10. How many hours did the following people spend managing the web-based application site each period? Please include management time, as well as time spent developing and testing the site.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. [Fill from C9oth\_specify /The other staff member you mentioned] |  |  |
| j. [Fill from C9oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**C11. Was there need to update the content of the application forms for the 2012-2013 school year?**

*Var*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| ALL |

**C12. Was there need for any new translation of the application forms for the 2012-2013 school year?**

*Var*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| c11=1 |
| IF C12=1, FILL **and translations** |

**C13. Who coordinated or worked on revising the content of the application form [and translations]?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 Other school-level staff 11

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C15

NO RESPONSE M GO TO C15

|  |
| --- |
| c11=1 and c13 ne m and c13 ne n |
| IF C12=1, FILL **and translations** |
| FILL response options (a-j) from responses selected at c13 |
| fill response option k from c13oth\_specify;if c13oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM C13oth\_specify;IF C13oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C14. How many hours did the following people spend revising the content of the application form [and translations] each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from C13oth\_specify/ The other school-level staff member you mentioned] |  |  |
| l. [Fill from C13oth\_specify /The other staff member you mentioned] |  |  |
| m. [Fill from C13oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**C15. Are hardcopy application forms printed by district or school staff each year?**

*Var*

🔾 Yes 1

🔾 No 0 GO TO C18

NO RESPONSE M GO TO C18

|  |
| --- |
| c15 = 1 |

**C16. Who coordinated or worked on printing hardcopy application forms?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 Other school-level staff 11

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C18

NO RESPONSE M GO TO C18

|  |
| --- |
| c16 ne m and c16 ne n |
| FILL response options (a-j) from responses selected at c16 |
| fill response option k from c16oth\_specify;if c16oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM C16oth\_specify;IF C16oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C17. How many hours did the following people spend having hardcopy applications printed each period? Please include management time as well as time spent printing forms.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from C16oth\_specify/ The other school-level staff member you mentioned] |  |  |
| l. [Fill from C16oth\_specify /The other staff member you mentioned] |  |  |
| m. [Fill from C16oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**C18. How many hardcopy application forms were printed last year (SY 2012-2013)? Your best estimate is fine.**

*Var*

 (FIELD DESCRIPTION)

 (RANGE NUMBER RANGE)

NO RESPONSE M

|  |
| --- |
| c15 = 1 |

**C19. What was the cost of the supplies used to print hardcopy application forms last year?**

*Var*

 $ (FIELD DESCRIPTION)

 (RANGE NUMBER RANGE)

NO RESPONSE M

|  |
| --- |
| c15 ne 1 |

**C20. If forms were printed by a vendor, what was the cost of printing hardcopy application forms last year?**

*Var*

 $ (FIELD DESCRIPTION)

 (RANGE NUMBER RANGE)

🔾 Not printed by a vendor N

NO RESPONSE M

|  |
| --- |
| c4 = 1 |

**The next questions are about parent outreach regarding applications.**

**C21. How did your district let parents or guardians know about the online application process?**

*Var*

*Select all that apply*

🞏 Letters mailed to parents or guardians 1

🞏 Emails to parents or guardians 2

🞏 School district website 3

🞏 Public service announcements 4

🞏 At school registration 5

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| ALL |

**C22. Who worked on letting parents or guardians know about the application process for free or reduced-price school meals (online or on paper)?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 Other school-level staff 11

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C24

NO RESPONSE M GO TO C24

|  |
| --- |
| c22 ne m and c22 ne n |
| FILL response options (a-j) from responses selected at c22 |
| fill response option k from c22oth\_specify;if c22oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM C22oth\_specify;IF C22oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C23. How many hours did the following people spend letting parents or guardians know about the application process each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from C22oth\_specify/ The other school-level staff member you mentioned] |  |  |
| l. [Fill from C22oth\_specify /The other staff member you mentioned] |  |  |
| m. [Fill from C22oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**C24. How were hardcopy application forms distributed?**

*Var*

*Select all that apply*

🞏 Picked up at school registration and/or school offices 1

🞏 Available to print from district website 2

🞏 Mailed to parents or guardians 3

🞏 Sent home with students 4

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| all |

**C25. Who worked on mailing application forms to parents or guardians and/or distributing application forms to schools to send home with students?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 11

🞏 Other school-level staff 12

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C27

NO RESPONSE M GO TO C27

|  |
| --- |
| c25 ne m and c25 ne n |
| FILL response options (a-j) from responses selected at c25 |
| fill response option k from c25oth\_specify;if c25oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM C25oth\_specify;IF C25oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C26. How many hours did the following people spend mailing application forms to parents or guardians and/or distributing application forms to schools to send home with students each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from C25oth\_specify/The other school-level staff member you mentioned] |  |  |
| l. [Fill from C25oth\_specify/The other staff member you mentioned] |  |  |
| m. [Fill from C25oth\_specify/The other staff member you mentioned] |  |  |

|  |
| --- |
| ALL |

**C27. Who answered calls with questions about the application process?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 Other school-level staff 11

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C29

NO RESPONSE M GO TO C29

|  |
| --- |
| c27 ne m and c27 ne n |
| FILL response options (a-j) from responses selected at c27 |
| fill response option k from c27oth\_specify;if c27oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM C27oth\_specify;IF C27oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C28. How many hours did the following people spend answering calls about the application process each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from C27oth\_specify/ The other school-level staff member you mentioned] |  |  |
| l. [Fill from C27oth\_specify /The other staff member you mentioned] |  |  |
| m. [Fill from C27oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| c4 = 1 |

**The next questions are about the submission and processing of applications in your district.**

**C29. How often were applications submitted online processed?**

*Var*

*Select one only*

🔾 On a rolling basis as they are submitted 1

🔾 Daily 2

🔾 More than once a week 3

🔾 Once a week 4

🔾 Once every two weeks 5

🔾 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| all |

**C30. Were paper forms returned to the child’s school or to a central office?**

*Var*

*Select one only*

🔾 Child’s school 1

🔾 Central office 2

🔾 Both child’s school and central office 3

NO RESPONSE M

|  |
| --- |
| all |

**C31. Was a business reply envelope provided for parents or guardians to return applications?**

*Var*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| C30 ne 2 |

**C32. Who collected the hardcopy application forms at the school level?**

*Var*

*Select all that apply*

🞏 Principals 1

🞏 School secretaries or administrative staff 2

🞏 School-level food service staff 3

🞏 Other school-level staff 4

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C34

NO RESPONSE M GO TO C34

|  |
| --- |
| C30 NE 2 AND C32 NE M and c32 ne n |
| FILL response options a and b from responses selected at C32 |
| fill response option c from c32oth\_specify;if c32oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options d and e FROM C32oth\_specify;IF C32oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C33. How many hours did the following people spend collecting hardcopy application forms each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. Principals |  |  |
| b. School secretaries or administrative staff |  |  |
| c. School-level food service staff |  |  |
| d. [Fill from C32oth\_specify/The other school-level staff member you mentioned] |  |  |
| e. [Fill from C32oth\_specify/The other staff member you mentioned] |  |  |
| f. [Fill from C32oth\_specify/The other staff member you mentioned] |  |  |

|  |
| --- |
| C30 NE 2 |

**C34. Were hardcopy applications logged in or processed at the school level?**

*Var*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| C30 NE 2 |

**C35. Did each school keep originals or copies of the hardcopy applications it received?**

*Var*

🔾 Yes 1

🔾 No 0

NO RESPONSE M

|  |
| --- |
| C30 NE 2 |

**C36. Who logged or copied forms (as applicable) and then sent the hardcopy application forms to the district office?**

*Var*

*Select all that apply*

🞏 Principals 1

🞏 School secretaries or administrative staff 2

🞏 School-level food service staff 3

🞏 Other school-level staff 4

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C38

NO RESPONSE M GO TO C38

|  |
| --- |
| C30 ne 2 and C36 ne m and c36 ne n |
| FILL response options a and b from responses selected at C36 |
| fill response option c from c36oth\_specify;if c36oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options d and e FROM C36oth\_specify;IF C36oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C37. How many hours did the following people spend at the school level logging, tracking, or sending hardcopy application forms to the district office each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. Principals |  |  |
| b. School secretaries or administrative staff |  |  |
| c. School-level food service staff |  |  |
| d. [Fill from C36oth\_specify/The other school-level staff member you mentioned] |  |  |
| e. [Fill from C36oth\_specify/The other staff member you mentioned] |  |  |
| f. [Fill from C36oth\_specify/The other staff member you mentioned] |  |  |

|  |
| --- |
| C30 ne 2 |

**C38. How often were hardcopy application forms sent to the district office?**

*Var*

*Select one only*

🔾 Daily 1

🔾 2 -4 times a week 2

🔾 Once a week 3

🔾 Once every two weeks 4

🔾 Kept at school level 5

🔾 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| all |

**C39. Who worked on logging and tracking hardcopy application forms at the district level?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C41

NO RESPONSE M GO TO C41

|  |
| --- |
| C39 ne m |
| FILL response options (a-h) from responses selected at C39 |
| FILL RESPONSE options i and j FROM C39oth\_specify;IF C39oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C40. How many hours did the following people spend logging and tracking application forms at the district level each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. [Fill from C39oth\_specify/The other staff member you mentioned] |  |  |
| j. [Fill from C39oth\_specify/The other staff member you mentioned] |  |  |

|  |
| --- |
| C30 ne 2 |

**C41. Were hardcopy application forms checked for completeness at the school level or at the district level?**

*Var*

*Select one only*

🔾 School level 1

🔾 District level 2

🔾 Both school level and district level 3

NO RESPONSE M

|  |
| --- |
| all |

**C42. Who worked on checking hardcopy application forms for completeness and collecting critical missing information?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 School-level food service staff 11

🞏 Other school-level staff 12

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C44

NO RESPONSE M GO TO C44

|  |
| --- |
| C42 ne m and c42 ne n |
| FILL response options (a-j) from responses selected at C42 |
| fill response option k from c42oth\_specify;if c42oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM C42oth\_specify;IF C42oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C43. How many hours did the following people spend checking hardcopy application forms for completeness and/or collecting critical missing information each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical/administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. School-level food service staff |  |  |
| l. [Fill from C42oth\_specify/The other school-level staff member you mentioned] |  |  |
| m. [Fill from C42oth\_specify/The other staff member you mentioned] |  |  |
| n. [Fill from C42oth\_specify/The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**C44. How is critical missing information from a hardcopy application (such as a signature) obtained?**

*Var*

*Select all that apply*

🞏 Letters mailed to parents or guardians 1

🞏 Letters sent home with students 2

🞏 Telephone calls or text messages to parents or guardians 3

🞏 E-mail to parents or guardians 4

🞏 Visits to students’ homes 5

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| all |

**C45. For “complete” applications, was there an automated process in place to determine students’ certification status?**

**?**

*Var*

🔾 Yes, fully automated process in place 1

🔾 Yes, partly automated process in place with some manual steps 2

🔾 No automated process in place 0

NO RESPONSE M

|  |
| --- |
| all |

**C46. Who reviewed “complete” applications to determine certification status? Please include internal reviews of initial determination.**

*Var*

*Select all that apply*

🞏 Automated review process 1

🞏 District food service director 2

🞏 Superintendent 3

🞏 Business manager 4

🞏 Student database administrator 5

🞏 Database or programming staff 6

🞏 District-level food service clerical or administrative staff 7

🞏 District-level communications department 8

🞏 Other district-level clerical or administrative staff 9

🞏 Principals 10

🞏 School secretaries or administrative staff 11

🞏 Other school-level staff 12

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO C48

NO RESPONSE M GO TO C48

|  |
| --- |
| C46 ne m and c46 ne n |
| FILL response options (a-j) from responses selected at C46 |
| fill response option k from c46oth\_specify;if c46oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM C46oth\_specify;IF C46oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**C47. How many hours did the following people spend reviewing completed applications to determine certification status each period? Please include management time and time spent on internal reviews of initial determination..** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from C45oth\_specify/The other school-level staff member you mentioned] |  |  |
| l. [Fill from C45oth\_specify/The other staff member you mentioned] |  |  |
| m. [Fill from C45oth\_specify/The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**C48. For how long are hardcopy application forms stored?**

*Var*

*Select all that apply*

🞏 Stored electronically 1

🞏 Less than one year 2

🞏 Between one year and three years 3

🞏 Between three years and five years 4

🞏 Longer than five years 5

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| all |

**C49. Are hardcopy application forms stored at the school level or the district level?**

*Var*

*Select one only*

🔾 Stored at the school level only 1

🔾 Stored at the district level only 2

🔾 Stored at both the school level and the district level 3

NO RESPONSE M

\*D. NOTIFICATION OF CERTIFICATION STATUS

|  |
| --- |
| all  |

**The remaining questions are about students certified through the application process, as well as those who were directly certified.**

**D1. Who worked on maintaining required documentation of certification status?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 School-level food service staff 11

🞏 Other school-level staff 12

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO D3

NO RESPONSE M GO TO D3

|  |
| --- |
| d1 ne m and d1 ne n |
| FILL response options (a-j) from responses selected at d1 |
| fill response option k from D1oth\_specify;if D1oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM d1oth\_specify;IF D1oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**D2. How many hours did the following people spend maintaining required documentation of certification status each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. School-level food service staff |  |  |
| l. [Fill from D1oth\_specify/The other school-level staff member you mentioned] |  |  |
| m. [Fill from D1oth\_specify/The other staff member you mentioned] |  |  |
| n. [Fill from D1oth\_specify/The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**D3. Who worked on drafting or updating the letters sent to notify parents or guardians of their children’s certification status?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 Other school-level staff 11

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO D5

NO RESPONSE M GO TO D5

|  |
| --- |
| D3 ne m and d3 ne n |
| FILL response options (a-j) from responses selected at d3 |
| fill response option k from D3oth\_specify;if D3oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM d3oth\_specify;IF D3oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**D4. How many hours did the following people spend drafting or updating notification letters each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from D3oth\_specify/ The other school-level staff member you mentioned] |  |  |
| l. [Fill from D3oth\_specify /The other staff member you mentioned] |  |  |
| m. [Fill from D3oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**D5. Who works on printing or copying the letters sent to notify parents or guardians of certification status?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 Other school-level staff 11

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO D7

NO RESPONSE M GO TO D7

|  |
| --- |
| d5 ne m and d5 ne n |
| FILL response options (a-j) from responses selected at d5 |
| fill response option k from D5oth\_specify;if D5oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM d5oth\_specify;IF D5oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**D6. How many hours did the following people spend printing or copying notification letters each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from D5oth\_specify/ The other school-level staff member you mentioned] |  |  |
| l. [Fill from D5oth\_specify /The other staff member you mentioned] |  |  |
| m. [Fill from D5oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**D7. In the past three months, how much money was spent on postage or other delivery costs for certification-related activities? Please include costs of mailing applications to parents or guardians, business reply envelopes, letters to parents or guardians notifying them of certification status, and any other postage or delivery costs.**

*Var*

|  |  |
| --- | --- |
|  | AMOUNT |
| a. Costs in July-September 2012  | $  |
| b. Average Monthly Cost After October, 2012 1 | $  |

NO RESPONSE M

|  |
| --- |
| all |

**D8. Who responds to questions about certification decisions?**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 Other school-level staff 11

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO D10

NO RESPONSE M GO TO D10

|  |
| --- |
| d8 ne m and d8 ne n |
| FILL response options (a-j) from responses selected at d8 |
| fill response option k from D8oth\_specify;if D8oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM d8oth\_specify;IF D8oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**D9. How many hours did the following people spend responding to questions about certification decisions each period? Please include management time.** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. [Fill from D8oth\_specify/ The other school-level staff member you mentioned] |  |  |
| l. [Fill from D8oth\_specify /The other staff member you mentioned] |  |  |
| m. [Fill from D8oth\_specify /The other staff member you mentioned] |  |  |

|  |
| --- |
| all |

**D10. How were certification results made available to school food service cashiers?**

*Var*

*Select one only*

🔾 Transmitted through an automated process 1

🔾 Lists printed and distributed 2

🔾

🔾 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

NO RESPONSE M

|  |
| --- |
| all |

**D11. Who coordinated or worked on making certification results available to school food service cashiers? Please include entering certification status into electronic systems as well as creating printed lists.**

*Var*

*Select all that apply*

🞏 District food service director 1

🞏 Superintendent 2

🞏 Business manager 3

🞏 Student database administrator 4

🞏 Database or programming staff 5

🞏 District-level food service clerical or administrative staff 6

🞏 District-level communications department 7

🞏 Other district-level clerical or administrative staff 8

🞏 Principals 9

🞏 School secretaries or administrative staff 10

🞏 School-level food service staff 11

🞏 Other school-level staff 12

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 98

Specify (STRING (NUM))

🞏 Response Option Other (SPECIFY) 99

Specify (STRING (NUM))

🞏 Not applicable N GO TO D13

NO RESPONSE M GO TO D13

|  |
| --- |
| d11 ne m and d11 ne n |
| FILL response options (a-j) from responses selected at d11 |
| fill response option k from D11oth\_specify;if D11oth\_specify is empty, fill **The other school-level staff member you mentioned** |
| FILL RESPONSE options l and m FROM d11oth\_specify;IF D11oth\_specify IS EMPTY, FILL **The other staff member you mentioned** |

**D12. How many hours did the following people spend making certification results available to school food service cashiers each period? Please include management time and time spent entering certification status into electronic systems, as well as time spent creating printed lists..** *(Your best estimate is fine.)*

|  |  |  |
| --- | --- | --- |
|  | Hours in July-September | Hours in Typical Month post October 1 |
| a. District food service director |  |  |
| b. Superintendent |  |  |
| c. Business manager |  |  |
| d. Student database administrator |  |  |
| e. Database or programming staff |  |  |
| f. District-level food service clerical or administrative staff |  |  |
| g. District-level communications department |  |  |
| h. Other district-level clerical or administrative staff |  |  |
| i. Principals |  |  |
| j. School secretaries or administrative staff |  |  |
| k. School-level food service staff |  |  |
| l. [Fill from D11oth\_specify/ The other school-level staff member you mentioned] |  |  |
| m. [Fill from D11oth\_specify /The other staff member you mentioned] |  |  |
| n. [Fill from D11oth\_specify /The other staff member you mentioned] |  |  |

E. STAFF SALARIES

**E1. Each of the staff categories that you have indicated were involved in certification activities are listed below.**

**E1a. Please enter the *average* salary or hourly rate (do not include fringe benefit costs) that employees in each category were paid in SY 2012-2013.**

**E1b. (For each response at E1) Is that per hour, per week, biweekly, bimonthly, per month or per year?**

|  |  |  |
| --- | --- | --- |
| **E1.****Staffing Position****(Fill with staff categories at Q…)** | **E1a.****Pay Rate(dollars)** | **E1b.****Basis Paid(select from list)** |
|
| 1(STRING (NUM)) | 1(STRING (NUM)) | 11 🔾 per hour2 🔾 per week3 🔾 biweekly4 🔾 bimonthly5 🔾 per month6 🔾 per year |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4 | 4 |
| 5 | 5 | 5 |
| 6 | 6 | 6 |
| 7 | 7 | 7 |
| 8 | 8 | 8 |
| 9 | 9 | 9 |
| 10 | 10 | 10 |

**E2. [For each response at E1] Are fringe benefits calculated as a percentage (such as 50 percent of salary), or some other way?**

 **If as a percentage, go to E2a. If some other way, go to E2b.**

**E2a. Please enter the rate.**

**E2b. If fringe benefits are not calculated as a percentage, but as an amount or some other way, please enter the dollar amount.**

|  |  |  |  |
| --- | --- | --- | --- |
| **E1.****Staffing Position****(Fill with staff categories at Q…)** | **E2.****Fringe Benefit** | **E2a.****Fringe Benefit Percentage** | **E2b.****Calculated another way (Enter dollar amount):** |
| 1(STRING (NUM)) | 11 🔾 Percentage **(GO TO E2a)**2 🔾 Some other way **(GO TO E2b)** | 1 PERCENTAGE | OTHER SPECIFY |
|  | 2 | 2 |  |
|  | 3 | 3 |  |
|  | 4 | 4 |  |
|  | 5 | 5 |  |
|  | 6 | 6 |  |
|  | 7 | 7 |  |
|  | 8 | 8 |  |
|  | 9 | 9 |  |
|  | 10 | 10 |  |