Attachment D: Confirmation of Telephone Interview

Dear Immunization Program Manager,

Thank you for agreeing to participate in a telephone interview designed to enhance knowledge about the variation that exists among immunization programs with regard to the staffing levels and structure essential for conducting core immunization program components.

Our telephone interview is scheduled for <Day>, <Date> at <time> <pm or am> (EST).

To participate in the telephone interview at the designated time, please use the following information:

Dial (toll-free): x-xxx-xxxx Participant Code: xxxxxxx

If you have any questions, please contact me at xxx-xxx or via email at <insert email address>.

Sincerely,

<Insert name, title of interviewer>