

## Appendix III. Call Script

### Call Script (USPS returned letter with no forwarding address)

#### Address Verification Script (for Voice Mail of Sample Member)

Hello, my name is \_\_\_\_\_. This is not a sales call. I am calling from Decision Information Resources for the Choice Neighborhood Initiative resident survey. [FLNAME] completed the survey in [COMPLETION\_DATE]. I am trying to reach (him/her) to confirm (his/her) current telephone number and address. Please have [FLNAME] call us at 1-888-864-1425, Ext. 132, that is 1-888-864-1425, Ext. 132, to verify (his/her) address and telephone information.

#### Address Verification Script (if someone answers at Sample Member's listed phone number)

Hello, my name is \_\_\_\_\_. This is not a sales call. I am calling from Decision Information Resources for the Choice Neighborhood Initiative resident survey. [FLNAME] completed the survey in [COMPLETION\_DATE]. I am trying to reach [FLNAME] to confirm (his/her) current telephone number and address. In the future, we are going to want to get in touch with [FLNAME] to talk about (his/her) neighborhood, household and health experiences. A recent mailing sent to the address on file was returned without a forwarding address. Could you please provide us with the best address to reach your/[FLNAME] and telephone number?

[Read aloud this Privacy Act information]

*The information collected for this study is protected by the Privacy Act of 1974. This research, authorized by 12 U.S.C. § 1701z-1 will be used by the Department of Housing and Urban Development only for the purposes of the Choice Neighborhoods evaluation and will not be used by HUD to determine recipient benefits. Participation in this collection is completely voluntary. The data gathered from the tracking will be analyzed and discussed exclusively in aggregate and no published reports using the survey data will single out any particular respondent. All research team members that will have access to these data will sign "Assurances of Confidentiality" pledges. The information collection requirements contained in this document have been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3520) and assigned OMB control number \_\_\_\_\_. The public reporting burden for this collection of information is estimated to average .13 hours.*

#### **[If not Respondent and address is not known]**

Can you tell me what is the best time to reach [FLNAME] here? Or could you tell me a better telephone number to reach [FLNAME] at?

#### **[If not Respondent and unwilling to confirm address or phone number]**

Could you please have [FLNAME] call us at 1-888-864-1425, Ext. 132? We would like to verify (his/her) contact information.

**Address Verification Script (for Voice Mail of Alternate Contact)**

Hello, my name is \_\_\_\_\_. This is not a sales call. I am calling from Decision Information Resources for the Choice Neighborhood Initiative resident survey. [FLNAME] completed the survey in [COMPLETION\_DATE]. I am trying to reach [ALT\_CONTACT]. I am seeking help to confirm that our records for [FLNAME] are correct. We want to get in touch with [FLNAME] to talk about (his/her) neighborhood, household and health experiences. [FLNAME] listed you as a contact during a recent interview. A recent mailing sent to (his/her) address was returned with no forwarding address. Could you please have [FLNAME] call us at 1-888-864-1425, Ext. 132, that is 1-888-864-1425, Ext. 1532 to verify (his/her) contact information? Thank you.

**Address Verification Script (if someone answers Alternate Contact phone number)**

Hello, my name is \_\_\_\_\_. This is not a sales call. I am calling from Decision Information Resources for the Work Advance Study. [FLNAME] completed the survey in [COMPLETION\_DATE]. I am trying to reach [ALT\_CONTACT]. I want to confirm that our records for [FLNAME] are correct. We want to get in touch with (him/her) to talk about (his/her) neighborhood, household and health experiences. [FLNAME] listed you/[ALT\_CONTACT] as a contact during a recent interview. A recent mailing sent to the address we had on file was returned without a forwarding address. Could you please provide us with their updated mailing address or a telephone number to reach [FLNAME]?

**[If not Alternate contact or unwilling to confirm address or phone number]**

Please have [FLNAME] call us at 1-888-864-1425, Ext. 132, that is 1-888-864-1425, Ext. 132, to verify (his/her) contact information.

**[If not Alternate contact]**

Can you provide me with the best time to reach [ALT\_CONTACT] at this number? Or could you tell me a better number to reach [ALT\_CONTACT]?

**[If Respondent address is not known]**

Can you tell me a better number to reach [FLNAME]?