## **ATTACHMENT 1:**

## SURVEY SAMPLING FORM

The e-mail and Survey Sampling Form follow this cover page. The Planning Grants to Develop a Model Intervention for Youth/Young Adults with Child Welfare Involvement At-Risk of Homelessness (YARH) process study will administer the survey sampling forms at two points in time to the project director to identify planning team members and key partners who will be asked to complete the Survey of Organizational Readiness and Partnership (Attachment 2).

## E-mail Communication with Project Directors Regarding Survey Sampling Form

Subject: Identifying Respondents for Youth at Risk of Homelessness (YARH) Survey of Organizational Readiness and Partnership

Dear [FIRST NAME of PROJECT DIRECTOR]

## Identifying Respondents for the Survey of Organizational Readiness and Partnership

I am writing to ask for your help with identifying respondents who are a part of your "Planning Grants to develop a Model Intervention for Youth/Young Adults with Child Welfare Involvement At-Risk of Homelessness" (also known as "YARH Planning Grants"). As you know, [GRANTEE NAME] is part of a network of grantees and partners that have received grant funding from the Children's Bureau (CB) in the Administration for Children and Families (ACF) to develop comprehensive service models to improve the well-being of youth at risk of homelessness (YARH).

To help us understand more about the grantee organizations and partners implementing planning programs funded by this award, Mathematica Policy Research will be conducting the Survey of Organizational Readiness and Partnership. This survey will seek the input of stakeholders or organizations with varying levels of involvement with [GRANTEE NAME].

For the survey, we would like to gather, first, a list of planning team members and, second, the name of a single individual from each organization or agency that has supported your planning team but are not members of the planning team (partner organizations). Since the planning process began, the organizations involved with the program may have changed. We then ask you to recommend *one individual* from each of the partner organizations you identify to complete the survey on behalf of the respective organization. Ideally, these individuals should be well informed about their organization's involvement with the service model planning process.

In the attached file, please provide no more than 20 individuals, including members of the planning team and individuals from partner organizations.

If you have any questions, please contact me at xxx-xxxx or YARH@mathematica-mpr.com.

The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to understand the grantee planning process. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Contact Name]; [Contact Address]; Attn: OMB-PRA (0970-XXXX).

**Instructions:** In the table below, please provide the organization, name, job title, and contact information for no more than 20 individuals. All members of the planning team should be included. If other individuals have been important and active partners in the last six months, please complete a row for them.

Sampling Form for Stakeholder/Network Survey

•	Organization Name	First Name of Team Member or Partner	Last Name of Team Member or Partner	Job Title	Phone Number	Email Address	Planning Team Member? Yes/No
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