Attachments 3-6 Respondent Communication Materials

Fast Response Survey System (FRSS) 108: Career and Technical Education (CTE) Programs in Public School Districts

OMB# 1850-0733 v. 32

Attachment 3 - District Cover Letter

Attachment 4 - Web Information Sheet

Attachment 5 - Nonresponse Follow-up Letter

Attachment 6 - Nonresponse Follow-up Script



U.S. DEPARTMENT OF EDUCATION

INSTITUTE OF EDUCATION SCIENCES

NATIONAL CENTER FOR EDUCATION STATISTICS

January 2017

Dear District Superintendent:

On behalf of the National Center for Education Statistics (NCES), I request your district's participation in the national survey *Career and Technical Education Programs in Public School Districts*. The purpose of the survey is to provide the U.S. Department of Education with nationally representative data about career and technical education (CTE) programs for high school students in U.S. public school districts. Westat, a research firm in Rockville, Maryland, is administering the study on behalf of NCES using the Fast Response Survey System (FRSS). The survey is designed to be completed in about 20 minutes by the person in your district most knowledgeable about CTE programs for high school students.

- Why is NCES conducting the survey? This study is designed to provide nationally representative information about CTE programs offered to high school students by public school districts. These programs may be offered at district facilities or in partnering off-site locations, such as area CTE facilities or postsecondary institutions. Such national data will provide policymakers with accurate and current information about these important education programs in U.S. public schools. NCES is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA; 20 U.S.C. § 9543).
- **Why is participation by your district important?** Your district's participation, while voluntary, is vital to the development of national estimates. Because your district is one of a small sample of districts selected for the study, your cooperation is critical to make the results of this survey comprehensive, accurate, and timely.
- How does NCES protect the confidentiality of the information that you provide? The information collected through the survey may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (ESRA, 20 U.S.C. § 9573). The federal Office of Management and Budget has approved the survey (OMB No. 1850-0733).
- What do you get from the study? Once the study is completed, NCES will present the findings in a report that will be released on the NCES website. Your district will be notified when it is released.

The person in your district most knowledgeable about career and technical education (CTE) programs for high school students may complete the survey using either the enclosed questionnaire or an online version. The online version of the survey is available at **www.XXXXX.org**. The username and password appear on the enclosed Web Survey Information Sheet. If your district completes the paper version of the questionnaire, please return it to Westat in the enclosed postage-paid envelope. **Please complete the survey only once, using either the paper or the online version.**

We ask that the survey be completed **within 3 weeks,** and that you keep a copy of the completed survey for your files. If you have any questions about this survey, please contact Cindy Gray, the Westat survey manager, at 800-937-8281, ext. 4336 (toll-free) or by e-mail at XXXX@westat.com. You may also call Chris Chapman, the NCES Project Officer, at 202-502-7414. Thank you for your assistance.

Sincerely,

Peggy Carr Acting Commissioner

Enclosures



U.S. Department of Education • Institute of Education Sciences • National Center for Education Statistics

Career and Technical Education Programs in Public School Districts

Web Survey Information Sheet for:

[District Name],	[State
Survey Website: www.XXXXX.org	
Username:	
Password:	



Enclosures

U.S. DEPARTMENT OF EDUCATION

INSTITUTE OF EDUCATION SCIENCES

NATIONAL CENTER FOR EDUCATION STATISTICS

[Date]

Dear District Superintendent:	
Recently, you were asked to have your district complete a survey on care school students for the National Center for Education Statistics (NCES), approved by the federal Office of Management and Budget (OMB No. 18 only be obtained from public school districts. If your district has already you for your participation. It is only through the help of district personne policymakers with valuable national data on CTE programs offered to his	U.S. Department of Education. This study, 850-0733), will provide national data that can completed the questionnaire, I wish to thank el such as you that NCES is able to provide
If your district has not yet completed the three-page survey, I ask that yo are urgently needed to report a current picture of CTE programs for stude is designed to be completed in about 20 minutes by the person(s) in your programs for high school students.	ents in public high schools. The questionnaire
Your district's participation, while voluntary, is vital to the development because your district is one of a small sample selected for the study. It is districts that we can fully represent information about CTE programs for school districts. Your district's answers may be used only for statistical pidentifiable form for any other purpose except as required by law (Educa § 9573).	only through the participation of the selected high school students across all types of public purposes and may not be disclosed, or used, in
The online version of the survey is available at www.XXXXXX.org , the sappear on the enclosed Web Survey Information Sheet. If you prefer to obtain a printable version from the survey website and fax it to 1-800-25.	complete a paper questionnaire, you may
Westat, an independent research firm, is administering the survey on beh please contact Cindy Gray, the Westat survey manager, at 1-800-937-828 XXXXX@westat.com. You may also call me at 202-502-7414. Thank you	81, ext. 4336 (toll-free) or by email at
	Sincerely,
	Chris Chapman Project Officer

${\bf RESPONDENT\ INFORMATION\ SHEET\ (RIS)}$ FRSS 108 – Career and Technical Education Programs in Public School Districts

LABEL	WITH DISTRICT	' CONTACT	INFORMATION	[]
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	CONTACT

Hello, my name is [GIVE NAME]. I'm calling from Westat on behalf of the U.S. Department of Education. Have I reached [GIVE NAME OF DISTRICT]?

We are calling to follow up on a packet that we recently sent to your district superintendent. May I please have your superintendent's name? (RECORD NAME IN SPACE BELOW) Also, is there a direct line at which we could reach him/her? (IF YES, RECORD NUMBER IN SPACE BELOW.)

	SUPI	ERINTENDENT'S NAME:
	SUPI	ERINTENDENT'S NUMBER:
Is he	/she av	ailable?
		YES (GO TO B ON PAGE 2)
		NO (GO TO A ON PAGE 2)

A. SUPERINTENDENT NOT AVAILABLE

comp	oleted by the person(s) in the district most knowledgeable about CTE programs for high school stude to whom the superintendent would have given it?	
	 YES May I have the name, title, and contact information for that person? (GO TO DI RESPONDENT CONTACT INFORMATION ON PAGE 5 AND RECORD INFORMATION, BEST AVAILABLE TIMES.) NO (CONTINUE BELOW) 	
	Id you please leave a message for the superintendent mentioning that I called about the survey on Cigh school students? When is a good time to call back? Callback Date/Time: Thank you for your time, I will call back.	ΓE programs
В.	SUPERINTENDENT CONTACT	
regardon ca from comp	o, my name is (YOUR NAME) and I am calling from Westat on behalf of the U.S. Department of ding a packet that we recently mailed to your attention. The packet contained a (INSERT)-colored of areer and technical education (CTE) programs for high school students. The packet also included at the U.S. Department of Education explaining the purpose of the study, and requested that the questleted by the person(s) in the district most knowledgeable about CTE programs for high school stude we the questionnaire?	questionnaire cover letter stionnaire be
	Yes, questionnaire received (CONTINUE WITH C BELOW) No, questionnaire not received (GO TO E ON PAGE 4)	
C.	QUESTIONNAIRE RECEIVED	
	Will you complete the survey yourself or have you given it to someone else?	
	Yes, superintendent responsible (GO TO 1 BELOW) No, someone else responsible (GO TO 2 ON PAGE 3)	
	1. Have you had a chance to complete the questionnaire? (CHECK ON)	
	Questionnaire completed and returned to Westat DATE RETURNED: MODE (Mail/web/fax): Thank you very much for participating in the survey. We will look for your question do not receive it soon, we will call back to let you know.	naire. If we
	Still working on questionnaire We would like to have all questionnaires completed as soon as possible. Can you give of when we can expect your completed questionnaire? EXPECTED DATE OF COMPLETION: (CONTINUE ON PAGE 3)	⁄e us an idea

The packet we mailed to your superintendent contained a (INSERT)-colored questionnaire from the U.S. Department of Education on career and technical education (CTE) programs for high school students. It is designed to be

		Please remember that you have the option of completing the questionnaire online at www.XXXXX.org , or you can complete the paper copy and return it by mail or fax, using our toll free fax number, 1-800-254-0984. Please keep a copy for your records. We will look for your questionnaire; if we do not receive it, we will call back to let you know. What is the best time to reach you? RECORD TIME: Thank you for your time.
	THE QUE	TERVIEWER: IF THE RESPONDENT PREFERS TO COMPLETE THE SURVEY ONLINE, PLEASE PROVIDE DISTRICT'S USER ID AND PASSWORD AND THE WEB ADDRESS; IF HE/SHE HAS THE STIONNAIRE IN FRONT OF HIM/HER, REFER THE RESPONDENT TO THE INFORMATION ON THE LL LABEL AFFIXED TO THE COVER PAGE.}
	2.	May I please have the name of the respondent, his/her title, and the best times to reach that person?
		YES (GO TO DESIGNATED RESPONDENT CONTACT INFORMATION ON PAGE 5)
		NO (CONTINUE WITH D BELOW)
D.	REF	USED DIRECT CONTACT WITH RESPONDENT
Do y	ou kno	w the status of the questionnaire? (CHECK ONE)
		Questionnaire completed and returned to Westat DATE RETURNED: MODE (Mail/web/fax):
		Thank you very much for participating in the study. We will look for your questionnaire. If we do not receive it soon, we will call back to let you know. Thank you for your time.
		Respondent still working on the questionnaire We are trying to have all questionnaires completed as quickly as possible. Can you give us an idea of when we can expect your questionnaire? EXPECTED DATE OF COMPLETION:
		{INTERVIEWER: Please remind the respondent that he/she has the option of completing the questionnaire online at www.XXXXX.org or he/she can complete the paper copy and return it by mail or by fax, using our toll free fax number 1-800-254-0984. Also, remind him/her to keep a copy of the completed questionnaire for their records.}
		We will look for your questionnaire; if we do not receive it, I will call back to let you know. What is the best time to reach you? BEST TIME:
		Thank you for your time.
		Status unknown Will you please check on the status of the questionnaire? I will call you back to check on the status. When would be a convenient time for me to call back?
		CALLBACK TIME:

E. SURVEY NOT RECEIVED

The survey is being conducted on behalf of the U.S. Department of Education to collect nationally representative information about career and technical education (CTE) programs for high school students. It is designed to be completed by the person(s) in the district most knowledgeable about CTE programs for high school students.

You have the option of completing the questionnaire online, or we can send another copy of the questionnaire to your district. Would it be possible to send the survey directly to the person who is most knowledgeable about CTE programs for high school students? (CHECK ONE BOX BELOW AND FOLLOW INSTRUCTIONS.)

NO. Send to superintendent (CONTINUE BELOW; VERIFY/RECORD NAME, TITLE, AND ADDRESS
ON LABEL. REQUEST FAX NUMBER OR EMAIL ADDRESS IF NEEDED. COMPLETE A REMAIL,
FAX, OR EMAIL REQUEST FORM.)
TTD: 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
YES. Send to designated respondent (RECORD NAME, TITLE, ADDRESS, PHONE AND FAX
NUMBERS, AND EMAIL ADDRESS IN PART II PAGE 5, DESIGNATED RESPONDENT CONTACT
INFORMATION. COMPLETE A REMAIL, FAX OR EMAIL REQUEST FORM FOR DESIGNATED
RESPONDENT.)

I will mail/fax/email the questionnaire out today. We are trying to obtain all completed questionnaires as soon as possible because the data are urgently needed. (CONTINUE BELOW. BASED ON PREFERENCE, ADJUST THE SENTENCE.)

May I please confirm your mailing address/get your fax number/get your email address? (VERIFY OR UPDATE ADDRESS AND OBTAIN FAX NUMBER AND/OR EMAIL ADDRESS.)

The questionnaire can also be completed and returned online at www.XXXXXX.org. If you prefer, you may complete the paper copy and return it by mail or by fax, using our toll free fax number, 1-800-254-0984. When can we expect your completed questionnaire?

EXPECTED C	OMPLETION DATE:	

Thank you for your time. We will look for your questionnaire. **Please remember to keep a copy of the completed survey for your records**.

<u>INTERVIEWER:</u> IF THE RESPONDENT PREFERS TO COMPLETE THE QUESTIONNAIRE ONLINE, PLEASE PROVIDE THE SCHOOL'S USER ID, PASSWORD, AND WEB ADDRESS: <u>www.XXXXXX.org.</u>

II. DESIGNATED RESPONDENT CONTACT INFORMATION

NAME:						-
ΓΙΤLE:						
Dhara #.						
Phone #:						
FAX #:						
Address:						
						_
Time	M	T	W	ТН	F	
Available time						
Other time						
	,					•
		Comm	nents			

superinte	y name is (YOUR NAME). I'm calling from Westat on behalf of the U.S. Department of Education. Your ndent (GIVE NAME) referred me to you regarding the (INSERT)-colored questionnaire from the U.S. ent of Education on career and technical education (CTE) programs for high school students. Did you receive ionnaire?
	YES (CONTINUE WITH A BELOW)
	NO (GO TO B ON PAGE 7)
A. R	ESPONDENT RECEIVED SURVEY
На	ve you had a chance to complete the questionnaire?
	Questionnaire completed and returned to Westat DATE RETURNED: MODE (Mail/web/fax):
	Thank you very much for participating in the survey. We will look for your questionnaire. If we do not receive it soon, we will call back to let you know. What is the best time to reach you? BEST TIME: Thank you for your time.
	Still working on questionnaire We would like to have all questionnaires completed and returned as soon as possible. Can you give us an idea of when we can expect your questionnaire? EXPECTED DATE OF COMPLETION:
	Please remember that you have the option of completing the survey online at www.XXXXXX.org , or you can complete the paper copy and return it by mail or by fax, using our toll-free fax number, 1-800-254-0984. Please keep a copy of the completed survey for your records. We will look for your questionnaire; if we do not receive it, we will call back to let you know. What is the best time to reach you? BEST TIME:
	Thank you for your time.
PLEASE IF HE/S	TEWER: IF THE RESPONDENT PREFERS TO COMPLETE THE QUESTIONNAIRE ONLINE, PROVIDE THE SCHOOL'S USER ID AND PASSWORD AND WEB ADDRESS: www.XXXXXX.org HE HAS THE QUESTIONNAIRE IN FRONT OF THEM, REFER HIM/HER TO THIS HATION ON THE SMALL LABEL AFFIXED TO THE COVER PAGE.
B. SU	JRVEY NOT RECEIVED
informati	ey is being conducted on behalf of the U.S. Department of Education to collect nationally representative on about career and technical education (CTE) programs for high school students. It is designed to be d by the person(s) in the district most knowledgeable about CTE programs for high school students.
(CONTIN	e the option of completing the questionnaire online or we can send another copy of the questionnaire to you lue below. Based on preference, adjust the sentence.) has confirm your mailing address/get your fax number/get your email address?
	ey can also be completed and returned online at www.XXXXX.org . If you prefer, you may complete the by and return it by mail or by fax, using our toll free fax number, 1-800-254-0984. When can we expect your

RESPONDENT CONTACT

completed questionnaire?

Thank you for your time. We will look for your questionnaire. **Please remember to keep a copy of the completed survey for your records**.

EXPECTED COMPLETION DATE:_____

<u>INTERVIEWER:</u> IF THE RESPONDENT PREFERS TO COMPLETE THE SURVEY ONLINE, PLEASE PROVIDE THE SCHOOL'S USER ID, PASSWORD, AND WEB ADDRESS: <u>www.XXXXXX.org</u>