

ATTACHMENT L.4

FOCUS GROUP CONFIRMATION LETTER: EMPLOYER

EMPLOYER FOCUS GROUP: PARTICIPANT CONFIRMATION LETTER

[DATE]

[PARTICIPANT NAME]
[EMPLOYER]
[ADDRESS 1]
[ADDRESS 2]
[CITY, STATE, ZIP]

Dear [PARTICIPANT NAME]:

Thank you for agreeing to join us for an important focus group about the Supplemental Nutrition Assistance Program (SNAP) Employment and Training pilot programs. SNAP, also called the [INSERT STATE SNAP PROGRAM NAME], is the program that helps millions of people buy food every year. This study sponsored by the U.S. Department of Agriculture, Food and Nutrition Service will help us learn what works in these pilots and what could be improved.

Please **arrive by [TIME] am./pm.** The focus group will be held at [NAME OF FACILITY], and will begin on time at [TIME] **am./pm.** You will receive a \$50 MAX Discover® prepaid card after the focus group is finished to offset any costs for participating, including any travel costs.

[NAME OF FACILITY] is located at [ADDRESS]. You can get there on public transportation. [BUS/TRAIN DIRECTIONS]. If you drive, you can park in the lot at [LOCATION]. Directions are at the end of this letter and a map is attached. If you have any questions or cannot come to the focus group, please call [NAME OF MODERATOR] at [PHONE #].

If you would like further information about the focus group or the study in general, please feel free to call [NAME, TITLE] at [PHONE #].

Sincerely,

Directions:

[INSERT DIRECTIONS TO FACILITY]

Public Burden Statement

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