Public Burden Statement: 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. The OMB control number for this project is 0930-0286. Public reporting burden for this collection of information is estimated to average 5 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 2-1057, Rockville, Maryland, 20857.

Garrett Lee Smith (GLS) National Outcomes Evaluation Campus Suicide Prevention Program Short Message Service Survey (SMSS)

Directory Recruitment Method - Opt in & Consent Text Messages

ICF is conducting a survey of suicide prevention at [CAMPUS]. Msg & data rates may apply. Please reply YES to this message to begin the survey.

Thank you! You will receive a \$5 Amazon gift code for participating. Go to http://bit.ly/l4npvn to review the full survey consent. Do you consent to participate in a 4-item survey about suicide prevention? Text Yes or No

E-mail/Listserv Recruitment Method - Consent

ICF is conducting a survey of suicide prevention at [CAMPUS]. You will get a \$5 Amazon gift code for completing. Msg&data rates may apply. Text YES to begin

Intercept Recruitment Method - Consent

This survey is about suicide prevention at [CAMPUS]. You will receive a \$5 Amazon gift code for completing. Go to http://bit.ly/l4npvn to review the survey consent. All responses are confidential. Do you consent to participate in a 4-item survey about suicide prevention? Text Yes or No

Preliminary Survey Text Message

Text "Stop" at any time to end. DO NOT RESPOND IF YOU ARE DRIVING OR in another situation where it is dangerous to text. To talk with a counselor at a local crisis center, please call the National Suicide Prevention Lifeline (NSPL) 1-800-273-8255, available 24/7. Contact smss@icfi.com for survey help.

Text Survey Begins

- 1. During the past 12 months, did you attend classes at [ENTER CAMPUS NAME]? TEXT Yes or No
- 2. During the past 12 months did you see, read, or heard of any suicide prevention effort at **[ENTER CAMPUS NAME]**? TEXT Yes or No

The next 2 items are about suicide. You may skip questions you prefer not to answer. Remember, all responses are confidential.

3. During the past 12 months, did you ever seriously consider attempting suicide? TEXT Yes, No, or SKIP

Please remember that you can speak to a counselor 24/7 by calling the National Suicide Prevention Lifeline at 1-800-273-8255.

4. During the past 12 months, how many times did you actually attempt suicide? TEXT 00 = 0, 01 = 1, 02 = 2-3, 03 = 4-5, 04= 6 or more, or SKIP

Text Survey Close

Thank you! Your \$5 Amazon code is [GIFT_CODE]. Send questions or concerns to smss@icfi.com. To talk with a counselor, call the NSPL at 1-800-273-8255, available 24/7. If you are in need of immediate help or assistance, please reply to this message with HELP.