



michael cohen group LLC  
research, evaluation, consulting

## Attachment J: Principal Letter of Agreement

**OMB BURDEN STATEMENT:** According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0584-0524. The time to complete this information collection is estimated at 15 minutes, including the time for reviewing instructions and completing the information collection.

<<DATE>>

Title of Study: Digital Nutrition Education Materials for Middle School  
Principal Investigator: Gerard O'Shea, Michael Cohen Group  
Sponsor or Funding Agency: United States Department of Agriculture Food and Nutrition Service (USDA FNS)

Dear Mr. O'Shea,

I am familiar with your research project entitled *Digital Nutrition Education Materials for Middle School*. I understand that Michael Cohen Group is conducting research on behalf of the United States Department of Agriculture Food and Nutrition Service. I understand that the study will involve three groups of teachers and three groups of students from my school participating in 45-minute focus groups, and that this requires a quiet space in the school for approximately five hours within the school day or after school. I understand that Michael Cohen Group will provide a \$250 facility fee to our school.

As the principal of <<school name>>, I confirm that the school grants permission for the proposed research to be conducted with teachers in our school.

I understand that this research will be carried out following sound ethical principles and that participant involvement in this research study is strictly voluntary and provides privacy of research data, as described in the protocol.

Sincerely,

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Printed Name of Principal