ATTACHMENT 12_E2: TELEPHONE VERIFICATION SURVEY

Telephone Verification Survey for the Evaluation of the Public Education Campaign on Teen Tobacco (ExPECTT)

Parent and Youth Verifications

Form Approved OMB No. 0910-0753 Exp. Date xx/xx/xxxx

ID:			
1.	Hello, my name i (RESPONDENT)?	s, with RTI International. May I speak with	
	IF UNAVAILABLE	-When would be a better time to speak with (RESPONDENT) or can (he/she) be reached at another number? (RECORD INFORMATION IN RECORD OF CALLS.)	
	IF AVAILABLE -	I am calling to verify the work of one of our field representatives, (REPRESENTATIVE NAME), who reported conducting an interview with you on (DATE OF INTERVIEW) for the Evaluation of the Public Education Campaign on Teen Tobacco. Do you remember completing the interview?	
		1 = YES 2 = NO → IF RESPONDENT DOES NOT REMEMBER THE INTERVIEW, REMIND HIM/HER THAT THE FR ASKED QUESTIONS HOUSEHOLD CHARACTERISTICS, MEDIA USE, ATTITUDES TOWARDS TOBACCO. [FILL CHILD NAME]. IF RESPONDENT STILL DOES NOT REMEMBER, SKIP TO CONCLUSION.	
2.	First, were you interviewed in person? 1 = YES 2 = NO		
3.	About how long was the interviewer present in your home? 1 = <30 MINUTES 2 = 30-44 MINUTES 3 = 45-59 MINUTES 4 = 60-90 MINUTES 5 = OVER 90 MINUTES		
4.	Was the interview conducted in your home or somewhere else? 1 = IN RESPONDENT'S HOME 2 = SOMEWHERE ELSE (SPECIFY)		
5.	Was your child paid for their participation in the study? 1 = YES 2 = NO → SKIP TO Q7		

6.	How much did they receive? \$		
7.	In what form were you paid? [EXAMPLES: CASH, CHECK, MONEY ORDER]		
8.	Was your child, [FILL CHILD], interviewed? 1 = YES 2 = NO → SKIP TO Q23		
IF NO,	PROBE FOR SPECIFIC INFORMATION		
9.	Did your child enter some of the answers into the computer themselves? $1 = YES$ $2 = NO$		
10.	Did the interviewer behave in a professional manner? 1 = YES 2 = NO (EXPLAIN)		
11.	Did [FILL CHILD]'s interview take place on the same day as your interview or on a different day? 1 = SAME DAY 2 = DIFFERENT DAY		
12.	About how long did [FILL CHILD] interview take? 1 = <30 MINUTES 2 = 30-44 MINUTES 3 = 45-59 MINUTES 4 = 60-90 MINUTES 5 = OVER 90 MINUTES		
13.	Those are all the questions I have. Do you have any additional comments you'd like to make about the interview(s)?		
	1 = YES (SPECIFY) 2 = NO		

CONCLUSION: Thank you very much for your time. Have a nice day/evening.

OMB No: 0910-0753 Expiration Date: xx/xx/xxxx Paperwork Reduction Act Statement: The public reporting burden for this collection of information has been estimated to average 2 minutes per response. Send comments regarding this burden estimate or any other aspects of this collection of information, including suggestions for reducing burden to PRAStaff@fda.hhs.gov.