

ATTACHMENT M

ADULT AND YOUTH ADVANCE LETTERS FOR YOUTH PHONE  
FOLLOW-UP SURVEY

**This page has been left blank for double-sided copying.**



Dear [PARENT NAME]:

Last year, you gave permission for your child to participate in the *Strengthening Relationship Education and Marriage Services* study, also known as *STREAMS*. We thank you for allowing your child to participate in this study.

As part of the study, participants are asked to complete two surveys about a year apart. Your child completed the first survey about a year ago. Mathematica Policy Research, the research firm that leads this study, is now conducting the second survey. This survey is similar to earlier survey – it asks about attitudes and experiences with relationships, experiences in school, and other activities.

All information collected for the study will be kept private to the fullest extent allowed by law. Any information your child provides through the survey will be combined with information from other participating youth. No individual information will be reported. Your child's name will not be attached to his/her answers, and no one outside the study team will see your child's answers.

We have been unable to reach your child at school to complete the survey. A member of the study team will call your child in the next month to complete the survey over the phone. If your phone number has changed since last year, please call us at [FILL NUMBER] to update your number. Your child can also complete the survey by calling us at the same number. The survey will take about 30 minutes. It is important that your child complete this survey because no one can replace him/her in this study. As a thank you for completing the survey, your child will receive a **\$20 gift card**.

Participation in the study is voluntary. Your child can choose to stop participating at any time with no consequences. The only risk connected with the study is that your child may be uncomfortable answering some questions in the survey. If that happens, your child can refuse to answer those questions.

If you have any questions about the study or your child's participation, please call [FILL NAME], toll-free, at [FILL NUMBER] between 9 a.m. and 5 p.m. Eastern Time, Monday-Friday.

Again, thank you for allowing your child to participate in this study.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert Wood".

Robert Wood, PhD  
Project Director  
Mathematica Policy Research

NOTE: The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to examine the effectiveness of healthy marriage and relationship education programs designed to improve intimate relationships.. 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 collection is XXXX-XXXX and it expires on XX/XX/XXXX.



Dear [CHILD NAME]:

Last year you completed a survey as part of your participation in the *Strengthening Relationship Education and Marriage Services Evaluation*, also known as STREAMS – thank you for your participation!

As you may remember, we told you we would be contacting you to complete an additional survey. The research firm that leads this study, Mathematica Policy Research, is now ready to conduct the next survey. This survey is similar to earlier survey – it asks about attitudes and experiences with relationships, experiences in school, and other activities.

All information collected for the study will be kept private to the fullest extent allowed by law. If you choose to participate, your information will be combined with information from other youth to determine the effectiveness of various youth programs. Your name will not be attached to the answers you give, and no one outside the study team will see your answers.

A member of the study team will call you soon to ask you to complete the survey over the phone. If your phone number has changed since last year, please call us to update your number at [FILL NUMBER]. You can also complete the survey at your convenience by calling us at the same number. The survey will take about 30 minutes. It is important that you complete this survey because no one can replace you in this study. As a thank you for completing the survey, you will receive a **\$20 gift card**.

Participation in the study is voluntary. You can choose to stop participating at any time with no consequences. The only risk connected with the study is that you may be uncomfortable answering some questions in the survey. If that happens, you can refuse to answer those questions.

If you have any questions about the study or your participation, please call [FILL NAME], toll-free, at [FILL NUMBER] between 9 a.m. and 5 p.m. Eastern Time, Monday-Friday.

We look forward to speaking with you soon!

Sincerely,

Robert Wood, PhD  
Project Director  
Mathematica Policy Research

NOTE: The Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to examine the effectiveness of healthy marriage and relationship education programs designed to improve intimate relationships.. 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 collection is XXXX-XXXX and it expires on XX/XX/XXXX.