



# **Mother and Infant Home Visiting Program Evaluation**

Dear [Respondent]:

Hello from the MIHOPE team! We hope you and [CHILD] and the rest of your family are doing well.

**Remind me – what’s MIHOPE?**

**Why should I continue to participate?**

**What’s happening now in MIHOPE?**

**When will you contact me again?**

**What’s happening next?**

For more information and news about MIHOPE, please visit [website link]. If you have any questions or concerns about MIHOPE, please call us toll-free at [toll free number].

The described collection of information is voluntary and will be used to learn how home visiting programs benefit families. 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 0970-0402 and it expires on XX/XX/XXXX.