**Attachment L**

**Time 1 Follow-up and Final Mailings – Paper**

**For the follow-up and final mailings, these letters will be sent to the school principal as necessary. If the teacher letter is included in the mailing, the school principal will give the teacher letter to the person they have identified to complete the Lead Health Education Teacher Questionnaire.**

**Missing Principal Questionnaire Only:**

Dear Principal:

Recently you were mailed the School Health Profiles School Principal Questionnaire booklet as part of the Centers for Disease Control and Prevention’s Test-Retest Reliability Study. If you have not done so already, please complete the questionnaire booklet and return it as soon as possible. In case you do not have the School Principal Questionnaire booklet, we have enclosed another copy, along with a return envelope. Confidentiality of responses is assured for all respondents.

Once you complete this questionnaire, you will receive the **second** questionnaire in approximately two weeks along with your first token of our appreciation.

If you have mailed your completed questionnaire booklets recently, thank you for your participation. If you have any questions, please contact **[CONTACT NAME]** at **[PHONE NUMBER AND E-MAIL ADDRESS]**.

Sincerely,

Name

Title

**Missing Teacher Questionnaire Only (Principal asked to give the letter addressed to the Lead Health Education Teacher to the person identified to complete the Lead Health Education Teacher Questionnaire):**

Dear Principal:

**Thank you** for completing and returning the first questionnaire in the Centers for Disease Control and Prevention’s Test-Retest Reliability Study of the School Health Profiles School Principal Questionnaire. Your input is invaluable.

In addition to the School Principal Questionnaire, we sent a Lead Health Education Teacher Questionnaire. We have not received a completed questionnaire from the staff member you designated to participate. Your teacher's input is as important to the success of the study as your input, even if health education is not taught at your school. I have enclosed another copy of the questionnaire. Please forward it to the appropriate teacher at your school. This teacher may be your only health education teacher, the department chair, the most senior health education teacher, or the staff member who is most knowledgeable about required instruction on health topics. If you, or your teacher, have any questions about the study, I may be reached at **[PHONE NUMBER]**.

Again, thank you for your help with these surveys.

Sincerely,

Name

Title

Dear Lead Health Education Teacher:

Recently you were provided with the School Health Profiles Lead Health Education Teacher Questionnaire booklet as part of the Centers for Disease Control and Prevention’s Test-Retest Reliability Study. If you have not done so already, please complete the questionnaire as soon as possible.

In case you do not have the Lead Health Education Teacher Questionnaire booklet, we have enclosed another copy, along with a return envelope. Confidentiality of responses is assured for all respondents. Once you complete the questionnaire, you will receive the **second** questionnaire in approximately two weeks along with your first token of our appreciation.

If you have completed your questionnaires recently, thank you for your participation. If you have any questions, please contact **[CONTACT NAME]** at **[PHONE NUMBER AND E-MAIL ADDRESS]**.

Sincerely,

Name

Title

**Missing Both Questionnaires (Principal asked to give the letter addressed to the Lead Health Education Teacher to the person identified to complete the Lead Health Education Teacher Questionnaire):**

Dear Principal:

Recently you were mailed the School Health Profiles School Principal and Lead Health Education Teacher Questionnaire booklets as part of the Centers for Disease Control and Prevention’s Test-Retest Reliability Study. If you have not done so already, please complete the School Principal Questionnaire booklet and return it as soon as possible. In case you do not have the School Principal Questionnaire booklet, we have enclosed another copy, along with a return envelope. Confidentiality of responses is assured for all respondents.

In addition to the School Principal Questionnaire, I have enclosed another copy of the Lead Health Education Teacher Questionnaire. Your teacher's input is as important to the success of the study as your input, even if health education is not taught at your school. Please forward it to the appropriate teacher at your school. This teacher may be your only health education teacher, the department chair, the most senior health education teacher, or the staff member who is most knowledgeable about required instruction on health topics.

As a token of appreciation for contributing your time and support, both you and the individual completing the Lead Health Education Teacher Questionnaire will each receive a $5 check upon completing the first questionnaire, and a $20 check upon completing the second questionnaire. If you have mailed your completed questionnaire booklets recently, thank you for your participation. If you have any questions, please contact **[CONTACT NAME]** at **[PHONE NUMBER AND E-MAIL ADDRESS]**.

Sincerely,

Name

Title

Dear Lead Health Education Teacher:

Recently you were provided with the School Health Profiles Lead Health Education Teacher Questionnaire booklet as part of the Centers for Disease Control and Prevention’s Test-Retest Reliability Study. If you have not done so already, please complete the questionnaire as soon as possible.

In case you do not have the Lead Health Education Teacher Questionnaire booklet, we have enclosed another copy, along with a return envelope. Confidentiality of responses is assured for all respondents. Once you complete the questionnaire, you will receive the second questionnaire in approximately two weeks along with your first token of our appreciation.

If you have completed your questionnaires recently, thank you for your participation. If you have any questions, please contact **[CONTACT NAME]** at **[PHONE NUMBER AND E-MAIL ADDRESS]**.

Sincerely,

Name

Title