Appendix K. Survey reminder email 1

OMB No. 0584-[NEW]

Survey of Supplemental Nutrition Assistance Program (SNAP) Employment and Training (E&T) Case Management

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OMB Number: 0584-XXXX Expiration Date: XX/XX/XXXX

SURVEY OF SNAP E&T CASE MANAGEMENT

Survey reminder email 1: Email to newly assigned respondents

To: Respondents named by SNAP director to respond to sections 1, 2, and 3

When: Beginning of week following introductory section submission **Subject:** Welcome to the FNS Survey of SNAP E&T Case Management

Dear [respondent first name],

[State/territory SNAP director] has designated you to complete part of the Survey of SNAP Employment & Training (E&T) Case Management. Mathematica is conducting this important study for the U.S. Department of Agriculture, Food and Nutrition Service. The purpose of the survey is to better understand the policies and guidance all 53 SNAP agencies provide about case management in their SNAP E&T programs, conducting assessments, and delivering participant reimbursements and other supports after referral to E&T. The information you provide will be used to inform best practices and support SNAP E&T programs across the country. It will also be included in a [State/territory name] profile as part of the study's final report.

You have been assigned to complete the following section(s) of the survey:

- [Fill "Case management" if assigned]
- [Fill "Assessments" if assigned]
- [Fill "Participant reimbursements and support services" if assigned]

To complete the survey, please visit [fill unique State web survey URL]. At this link, you will also find a PDF of the full survey, if you'd like to review the questions in advance. It will take approximately 45 minutes to complete the entire survey; however, each section of the survey listed above takes about 13 minutes to complete. **Please complete the survey by [fill date that is two weeks after email date].**

[*If respondent assigned to Assessment section:*

To better understand what types of assessments SNAP E&T programs are providing, we are collecting assessment tools that States and territories use. Please also email us <u>one</u> initial assessment tool commonly used in [State name] to assess E&T participants' needs or work readiness after they are referred to the program. We understand that you might need to reach out to an E&T provider for a copy of an assessment tool. The tool you select should:

Be an initial assessment tool that assesses participants' needs or work readiness.
 This would be the first assessment the participant would take <u>after</u> being referred to E&T.
 It might assess educational attainment, work experience, basic skills, barriers to employment, or service needs.

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• **Be the most commonly used initial assessment tool in your State or territory**, either by the number of local SNAP offices or E&T providers that use it or the number of participants who take it.

 NOT be a purchased, propriety aptitude or interest inventory assessment like CASAS or ACT WorkKeys.

Please email a PDF or Microsoft Word version of this assessment tool to [fill study email address] by [fill date that is two weeks after email date]. In your email, please include a brief explanation of (1) how the assessment is used, (2) who administers it, and (3) when in the process it is administered. If you <u>only</u> use proprietary assessment tools for initial assessment, please just send us the name of the most commonly used proprietary assessment tool and the three pieces of information requested above.]

As a reminder, participation in this study is voluntary. Be assured that there will be no penalties if you decide not to respond, either to the information collection as a whole or to any particular questions. The information you provide will be private and will not be maintained or disclosed in identifiable form to anyone, except as otherwise required by law.

If you have any questions or concerns, please contact the Mathematica study team at [fill study email address]. If you are unable to complete the survey online, please call us at [fill study toll-free number] during the hours of 9:00 a.m. to 5:00 p.m. Eastern Time to complete the survey over the phone. If you are unable to complete the survey online or over the phone, you may complete it as a fillable PDF and return the completed survey to [fill study email address].

Thank you for your time and your participation in this important study!

Sincerely,

Kristen Joyce

Project Director, Survey of SNAP E&T Case Management

Public Burden Statement

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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-xxxx. The time required to complete this information collection is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the following address: U.S. Department of Agriculture, Food and Nutrition Services, Office of Policy Support, 1320 Braddock Place, Alexandria, VA 22314, ATTN: PRA (0584-xxxx). Do not return the completed form to this address.