# Appendix L. Survey reminder email 2

OMB No. 0584-[NEW]

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

November 5, 2021

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

## SURVEY OF SNAP E&T CASE MANAGEMENT

Survey reminder email 2: Introductory section incomplete (biweekly reminder)

To: SNAP director

When: Biweekly, scheduled (weeks 2, 4, 6, 8, and 10)

**Subject:** Reminder! Complete the FNS Survey of SNAP E&T Case Management

Dear [Name of SNAP director],

This is a reminder to complete the Survey of SNAP Employment & Training (E&T) Case Management. [Kathryn Law or whomever is sending the email for FNS], [title of email sender], described the study and survey to you in an email on [fill date]. The information you provide about case management, assessments, and participant reimbursements and other supports after referral to E&T will be used to inform best practices to 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.

### **About the survey**

It will take approximately 45 minutes to complete the entire survey. When you complete the introductory section, which will take about 6 minutes, you may assign other staff to complete sections 1 (case management), 2 (assessments), and 3 (participant reimbursements and support services), which will take about 13 minutes each to complete.

#### **Complete the survey**

**Please visit [fill unique State web survey URL] to complete your survey.** A PDF version of the full survey is also available at [insert link].

#### Please complete the survey by [fill date that is two weeks after email date].

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].

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.

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

If you have any questions or concerns, please contact the Mathematica study team at [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.