# Attachment N: E-mail Reminder Text

Dear [NAME],

Over the past few weeks, I’ve been trying to reach you by telephone to request your participation in a survey as part of the National Evaluation of the Health Profession Opportunity Grants (HPOG) Program. When you applied to [PROGRAM NAME], in [SITE], you agreed to take part in the HPOG study. Your participation is voluntary. Your input is very important and I’d like to schedule an appointment to talk. All information you provide will be kept private. The interview should last about 60 minutes and after you complete the survey you will receive a gift card valued at $40 to thank you for your help with this important study.

The HPOG study is funded by the Administration for Children and Families (ACF). ACF is part of the U.S. Department of Health and Human Services (HHS). These surveys will help ACF to see how programs like [PROGRAM NAME] are working. We are interested in the experiences of everyone who applied to the HPOG program, even if you were not selected to participate in the program.

I would like to schedule an appointment to complete the interview at a time that is convenient for you. Please respond to this email or call me at [xxx-xxx-xxxx]. Use this ID number to help me locate your record: [ABTID]. I would also be happy to answer any questions you may have about the survey.

Thank you in advance for your time and assistance with this project.

Sincerely,

[Interviewer Name]

*Paperwork Reduction Act (PRA) Statement: Your participation in this information collection is voluntary. 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 0970-0462 and it expires xx/xx/xxxx. If you have comments regarding this collection of information, including suggestions for reducing this burden, please send them to Gretchen Locke, 55 Wheeler St Cambridge, MA 02138; Attn: OMB-PRA (0970-0462).*