**OUTREACH EMAIL**

**Public Housing Authority (PHA), Public Child Welfare Agency (PCWA),**

 **or Continuum of Care (COC)**

Dear [NAME],

In collaboration with the U.S. Department of Housing and Urban Development (HUD), the U.S. Department of Health and Human Services, Administration of Children and Families (ACF) has contracted a team of researchers at the Urban Institute and Chapin Hall at the University of Chicago to gather evidence of how agencies are using housing vouchers to address the diverse needs of youth involved in the child welfare system.

We are contacting you today because your agency was identified as a crucial partner in a Family Unification Program (FUP) that provides housing vouchers to youth aging out of foster care. Due to your role, we would like to invite you to participate in an online survey to help us better understand how FUP vouchers are being used to address the housing needs of this population, as well as identify any unique benefits or challenges your agency has experienced serving youth in tandem with partnering organizations. Your participation in this study will help our team gather evidence of how FUP is being used in practice to support youth transitioning from foster care to adulthood.

Before you begin, there are several important things for you to understand:

* This survey will include questions regarding your program operations, the youth you serve, eligibility requirements, voucher distribution methods, and your experience collaborating with your partner agencies to help us better understand how your program functions.
* Your participation in this survey is completely voluntary, you can skip any questions you would prefer not to answer or end the survey at any time.
* Participating or choosing not to participate in this research will have no effect on your FUP program or eligibility to receive housing vouchers.
* The survey should take about **35 minutes** to complete, but time may vary based on the components of your program. If you cannot complete the survey in one sitting, you may **save your place** in the survey and finish it at a later time. Please note, however, that we need to have all responses by **[DATE]**.
* We will share what we learn about your Family Unification Program with ACF and HUD as part of our evaluation activities. All the information you provide will be kept private to the extent permitted by law.

To begin the survey, please click the following link: [LINK].

Thank you in advance for responding to this survey. Your responses will help the U.S. Department of Housing and Urban Development and U.S. Department of Health and Human Services better understand how communities are serving the housing needs of foster youth aging out of care.

Please let me know if you have any questions.

Sincerely,

[Researcher name and contact info]

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 number for the described information collection is XXXX-XXXX and the expiration date is XX/XX/XXXX.