

## **G13. Parent Recruitment Letter (Children)**

**This page has been left blank for double-sided copying.**

*Note to reviewers: The QR code is an example. The actual QR code will take sample members to the recruitment website.*

[DATE]

Dear Parent/Guardian of [CHILDNAME]:

We are pleased to invite you and your child to participate in a new and exciting study! It is called the second Study of Nutrition and Activity in Child Care Settings (SNACS-II). Your child care provider and your child were randomly selected to participate. The study will help child care providers and the U.S. Department of Agriculture understand how to better help children learn and grow.

As a study participant, you will:

- ❖ Take part in up to three telephone interviews to tell us about your child's activities and what [s/he] eats outside of child care. Each interview will take no more than 30 minutes.
- ❖ Receive up to \$60 in gift cards for your time.

**To sign up for this study:**

- ❖ Go to [www.SNACSII.com](http://www.SNACSII.com) or scan the QR code:

- Enter your passcode [###].



- ❖ Or return the enclosed consent and permission form by mail or to [POC NAME/the person who gave you this packet].

We will also visit your child care provider to observe your child at meal and play times and measure your child's height and weight. We will make every effort to keep the information about you and your child private. The study report will not include names or other information that could be used to identify you or your child. Your participation is voluntary and there are no penalties if you decide not to participate.

We have enclosed a brochure with more information about the study. Thank you for your time and consideration!

Sincerely,

[SIGNATURE]

Mary Kay Fox  
SNACS-II Project Director, Mathematica

Enclosures: Parent Brochure and Parent Consent and Permission Form for Children

The Food and Nutrition Service (FNS) is collecting this information to understand the nutritional quality of CACFP meals and snacks, the cost to produce them, and dietary intakes and activity levels of CACFP participants. This is a voluntary collection and FNS will use the information to examine CACFP operations. The collection does request personally identifiable information under the Privacy Act of 1974. Responses will be kept private to the extent provided by law and FNS regulations. 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 0.0501 hours (3 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: U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22314. ATTN: PRA (0584-xxxx). Do not return the completed form to this address.