

**Appendix F:  
Appointment Call Script  
(for participants who completed web screener)**

Hi. May I please speak to [RESPONDENT]?

My name is \_\_\_\_\_, and I'm calling in reference to the Grilling Study that you signed up for online a day or two ago. I would like to schedule a time for you to come to our research offices and take part in the study. As part of the study, you will prepare a meal and participate in a short interview. The study will take no more than 2 hours, and you will receive a \$75 gift card and a small gift for taking part in the study.

Are you still interested in participating in the study?

- Yes  
 No → Thank you for your time.

Great!

Please note that additional screening for Covid-19 exposure and symptoms will occur upon arrival which may determine you ineligible at that time.

The study will be held on North Carolina State University's campus on [DATES] and [TIMES]. What day and time work best for you? **Schedule appointment.**

Great! I have you scheduled for [DATE] at [TIME]. **Confirm appointment date and time.**

Please be on the lookout for an email from our research team within a few business days regarding how to prepare to come to your study session and what you should expect. Is your email address [EMAIL ADDRESS]?

- Yes  
 No → **Correct email address.**

Can you please contact me if you are unable to attend? My phone number is XXX-XXX-XXXX, and my email is xxxxxxxx@ncsu.edu.

**[IF ANSWERING MACHINE]** My name is \_\_\_\_\_, and I'm calling in reference to the Grilling Study that you signed up for online a day or two ago. I would like to schedule a time for you to come to our research offices and take part in the study. Please call me at 919-XXX-XXXX to schedule a time. You will receive a \$75 gift card and a small gift for taking part in the study. Thank you.

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 0583-0169 and the expiration date is XX/XX/XXXX. The time required to complete this information collection is estimated to average 7 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.