**N.8. Urgent reminder email for respondents**

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OMB Control No: XXXX-XXXX

Expiration date: XX/XX/20XX

**To:** Respondent assigned to modules

**When:** Weekly (weeks 13,14, 15, and 16)

**Subject:** Urgent – Response needed to your section of the SNAP Language Access Survey

Dear [RESPONDENT assigned to modules],

It is urgent that you complete the SNAP Language Access Survey. [SNAP State Administrator FN LN] has assigned you to complete part of the survey. If we do not receive a completed survey by [FILL DATE], [State/Territory Name]’s profile in the study’s final report will be missing important information.

**You have been assigned to complete the following section(s) of the survey:**

* [Fill “SNAP language access policy” if assigned]
* [Fill “SNAP language access procedures” if assigned]
* [Fill “Civil rights processes” if assigned]
* [Fill “SNAP language access training” if assigned]
* [Fill “SNAP Employment and Training language access procedures” if assigned]
* [Fill “Disaster SNAP language access procedures” if assigned]
* [Fill “SNAP-Education language access procedures” if assigned]

**To complete your section(s), please visit [fill unique State web survey URL].** Each section of the survey that you have been assigned takes about X minutes to complete.

**Please complete the survey by [FILL DATE]. This will be your final chance to participate in the study.**

If you are unable to complete the survey online, please call us at 1-800-XXX-XXXX between 9:00 a.m. and 5:00 p.m. ET, Monday through Friday, 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 [insert link to fillable PDF] and return it to [emailinbox]@mathematica-mpr.com.

Thank you for your time and participation in this important study!

Sincerely,

Maria Boyle

Project Director, SNAP Language Access Study

Public Burden Statement

This information is being collected to assist the Food and Nutrition Service to better understand the language landscapes in which Supplemental Nutrition Assistance Program (SNAP) and Nutrition Assistance Program (NAP) agencies operate and their associated limited English proficiency (LEP) policies and operations. This is a voluntary collection and FNS will use the information to improve access of SNAP to LEP individuals. This collection does not request any personally identifiable information under the Privacy Act of 1974. 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 0.0334 hours 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 22306 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.