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| DETAIL OF CHANGES TO BASELINE INFORMATION FORM 01/11/2024 |
| Location | **Original Text** | **Revised Text** | **Reason for change** |
| Page 1, list of contact variables | A. First Name, Middle Name, Last Name, SuffixB.           Date of Birth (MM/DD/YYYY)C.           Social Security NumberD.          [If no SSN] Alien Registration NumberE.           [PHA] Household ID Number | 1. First Name,
2. Middle Name,
3. Last Name,
4. Suffix
5. Date of Birth (MM/DD/YYYY)
6. Social Security Number
7. [If no SSN] Alien Registration Number
8. [PHA] Household ID Number
9. Email Address
10. Mode of Enrollment
 | Made each name component a separate field; added email address to send copies of consent form and incentive payment, capture mode of enrollment to aid in consent prompts.  |
| Q1 | 1 Not at all satisfied2345 678910 Extremely satisfied | 1 Not at all satisfied2345 Neither Satisfied nor Dissatisfied678910 Extremely satisfied | Added a mid-point description to help guide respondent  |
| Q3 | 1 Very 2 Somewhat 3 Neutral4 Not much 5 Not at all | 1 Very Important 2 Somewhat Important 3 Neutral4 Not very Important5 Not at all Important | Added “Important” to response options for clarity |
| Q11 | What is the best method to contact you (phone call, text, email)?IF EMAIL: What is your email address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_IF PHONE OR TEXT: What is your phone number? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | What is the best method to contact you (phone call, text, email)* Phone: What is your phone number?
* Text: What is your phone number?
* Email: What is your email address?
* No preference
* What is your email address?
* What is your phone number?
 | Added a no preference option and linked collection of phone and email to their preferred option.  |
| Incentive Module | N/A | A1: Confirms spelling of name information captured at the start of enrollmentA2: captures address informationA3 and A4: confirms or captures email addressA5 confirms or captures address to send incentive if virtual is not an option. | Added items to confirm information needed to send virtual incentives and to have contact information for recruiting for implementation study interviews |
| Page 6, text box | The OMB number and expiration date for this collection are OMB #: XXX-XXXX Exp: XX/XX. | The OMB number and expiration date for this collection are OMB# 2528-0345 Exp: 01/31/2027. | Updated to reflect OMB number issued upon approved on 1/10. |
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| SUMMARY OF CHANGES TO RENT REPORTING INFORMED CONSENT – 01/12/2024 |
| Location | **Original Text** | **Revised Text** | **Reason for change** |
| Page 1, paragraph 1 | [EVALUATOR] | Abt Associates, MEF, and their partners (the research team) | Replaced the placeholder for Evaluator with the names of the firms conducting the research. |
| Throughout the document | EVALUATOR | Research team | We decided to refer to the team conducting the research as the research team instead of the evaluator.  |
| Page 2, second bullet | **Group Two**: This group have their rent payment information reported to credit bureaus.  | **Group Two**: This group will not have their rent payment information reported to credit bureaus.  | Fixed typo. |
| Page 3, first paragraph | During the 24-month study the PHA will submit… | During the study the PHA will submit… | Removed reference to a 24-month study period given uncertainty about when exactly the study will be completed.  |
| Page 3, first paragraph | and dates of birth of all study participants to collect the following information about all households participating in the program.  | and dates of birth of all study participants to collect the following information.  | Made edit to clarify that this information will be collected of all study participants, not just those assigned to group 1. |
| Page 6, text box | The OMB number and expiration date for this collection are OMB #: XXX-XXXX Exp: XX/XX. | The OMB number and expiration date for this collection are OMB# 2528-0345 Exp: 01/31/2027. | Updated to reflect OMB number issued upon approved on 1/10. |
| Privacy Act Statement on BIF and ICF | [Add SORN name and number] | The SORN name and number are: Moving to Work Asset Building Cohort Evaluation Data Files, HUD/PDR-11 | Added SORN name and number |