

SNAP-Ed Connection Resource Sharing Form DRAFT

Form FNS-889 - Approved OMB No. 0584-0625 - Expiration Date X/X/XXXX

* Required

About This Form

This is a DRAFT form for the Office of Management and Budget information collection submission

This form is used to submit resources to the USDA Food and Nutrition Service Supplemental Nutrition Assistance Program (SNAP-Ed) Connection Library. Information collected via this form enables FNS to review these resources for inclusion in the SNAP-Ed Library. Please submit one form per resource being submitted. **After completing this form, please e-mail a copy of the full-text resource to snap-edconnection@usda.gov.**

Please note, this form is not used to submit nutrition and physical activity interventions (*i.e.*, educational materials, curricula, etc.) or SNAP-Ed success stories.

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 control number for this collection is OMB # 0584-0625. The time required to complete this information will vary based upon one's relationship to the resource being submitted. It is estimated to take 25 minutes to complete the entire survey. This includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you need help with this form, please contact us at U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22314 ATTN: PRA (0584-0625). Do not return the completed form to this address.*

Expiration date: 6/30/20XX

FNS-889

1. Resource Type *

(select the option that best describes this resource)

- Report
- SNAP-Ed Staff Training
- Social Media
- Toolkit/Guide
- Webinar
- Other

2. Title *

(input the name of the resource; limit your response to 20 words)

3. Year

(input the calendar year this resource was developed/finalized)

The value must be a number

4. Developer *

(input the name of the author, agency or organization that developed the resource)

5. Description *

(describe what the resource is and how it shares information about, or may provide a benefit to SNAP-Ed; limit your response to 200 words)

6. Website

(input the web address (i.e., URL) if the resource is located on a website)

7. Setting*(complete if your resource is about, or indented to be used for a specific setting or settings)*

Select all that apply.

- Active Transport
- After-school
- Apps & Mobile
- Colleges/Universities
- Faith-Based Centers
- Farmers Markets
- Food Pantries
- Gardens (School/Community)
- Healthcare
- Media Communications
- Parks & Public Spaces
- Pre-K & Child care
- Food Retail
- Schools
- Senior Centers
- Tribal Reservations
- USDA Program Sites
- Worksites
- Other

8. Age/Population Group*(complete if your resource is about, or intended to be used with a specific age and/or population group)*

Select all that apply.

- Preschool
- Elementary School
- Middle School
- High School
- Pregnant/Breastfeeding
- Parents/Caregivers
- Adults
- Older Adults
- Individuals with Disabilities
- Military/Veterans
- People Experiencing Homelessness
- SNAP-Ed Staff
- Tribes & Tribal Organizations
- Other

9. State*(select the State(s) or territory that the resource is from)*

Select all that apply.

 National Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware District of Columbia Florida Georgia Guam Hawaii Idaho Illinois Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi

10. Language*(select the language(s) the resource is available in)*

Select all that apply

 English Spanish Korean Chinese Vietnamese Hmong Russian Creole French Other**11. Funding Source ****(input the name of the agency or organization that funded the development of this resource (e.g., if SNAP-Ed funds were used input USDA. SNAP-Ed))***12. Resource Cost***(select "yes" if there is a cost for others to use this resource or select "no" if there is no cost)* Yes No**13. Associated Journal Articles***(complete if applicable; enter article title(s) and links (i.e., URL) to abstract(s))***14. Name ****(point of contact for questions or follow-ups regarding this submission)*

15. E-mail Address *

(point of contact for questions or follow-ups regarding this submission)

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