Appendix E4.1 Rhode Isla	nd Participant Surve	y Specifications

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Rapid Cycle Evaluation of Operational Improvements in SNAP E&T Programs

Participant Survey: Rhode Island

2023

I. Introduction

ALL

[SNAP E&T RCE INTERVENTION SITE]

IF MODE = CATI, FILL: Hi, my name is [INTERVIEWER NAME]. I work for a company called Mathematica and I am calling on behalf of the U.S. Department of Agriculture, Food and Nutrition Service, or FNS, about an important study.

IF MODE = WEB, FILL: the U.S. Department of Agriculture, Food and Nutrition Service (FNS)

IF MODE = CATI, FILL: FNS

Intro.

CATI ONLY: [Hi, my name is [INTERVIEWER NAME]. I work for a company called Mathematica and I am calling on behalf of the U.S. Department of Agriculture, Food and Nutrition Service, or FNS, about an important study.

[SNAP E&T RCE INTERVENTION SITE] is participating in a study that [the U.S. Department of Agriculture, Food and Nutrition Service (FNS) / FNS is sponsoring. This study will help the agency learn more about ways to improve the Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T) programs for participants. E&T programs are intended to help SNAP participants gain skills and find work. [SNAP E&T RCE INTERVENTION SITE] is one of eight sites seeking to understand the impact of changes to SNAP E&T program processes on SNAP participants' engagement with E&T services. Mathematica is leading this study on behalf of FNS

ALL

[SNAP E&T RCE INTERVENTION SITE]

10. By giving permission to be in the study, you agree to take a short 15 minute survey. The survey asks about barriers to engaging with services and seeking employment, program satisfaction, and reasons for engagement decisions.

Here are some other things to know about the study:

- The study will use your data for research purposes only.
- Study reports will summarize all participants' findings and will not identify you. None
 of the reports prepared for this study will include information that identifies you. All
 confidential information will be stored safely and destroyed at the end of the study.
- Taking the survey is completely voluntary. You can skip any question that you don't
 want to answer. If you are unsure of how to answer a question, please give the best
 answer you can, rather than leaving it blank.
- Participating in the study has no known risks and will not affect your benefits. Your
 participation will help us learn about how to improve SNAP E&T programs and
 services to help SNAP participants gain skills and find work.
- You will receive a \$30 gift card to thank you for your time completing the survey.

WEB ONLY = Please indicate below whether you agree to be in the study. If you have any questions about the study or would like a copy of the above information, please contact Mathematica's survey director, Kim McDonald, at 855-831-1718 or email her at SNAPETsurvey@mathematica-mpr.com.

CATI ONLY = In a moment, I will read a statement for you to provide your consent to participate. If you have any questions about the study or would like a copy of the above information, please contact Mathematica's survey director, Kim McDonald, at 855-831-1718 or email her at SNAPETsurvey@mathematica-mpr.com . O	lescrij

PROGRAMMER:

IF I0 = 2, STATUS NON-CONSENT AND EXIT SURVEY

O I do not agree to participate in the study......2

CATI/CAWI HARD CHECK: AN ANSWER MUST BE PROVIDED FOR THIS QUESTION.

10 = 2			
IF mode	= web, fill "Your feedback is important. Please give us a call at 8	8 55-831-1718 ."	
NoConse	nt. Thank you very much for your time. [Your feedbaus a call at 855-831-1718.]	ck is importan	t. Please give
[CA	TI] ENTER 1 TO CONTINUE	1	CATI SKIP BO THANKS
	PROGRAMMER SKIP BOX NOCONSENT		
	IF I0 = 2, STATUS ADAMANT REFUSAL (DIALDISP = 39, SMS S AND EXIT SURVEY. APPLY REFUSAL LOCTYPE AND FOR 2053		
	DO NOT CHANGE CONFIRMIT STATUS IN CASE OF CONVER	SION	
10 = 1			
I1. F	rst, we'd like to verify that we are reaching the correct person.	What is your o	late of birth?
I_	_ / / _		
M	ONTH DAY YEAR		
(1-12) (1-31) (1918-2010)		
	VALIDATION CHECK:		
	2 OF 3 FIELDS AT I1 MUST MATCH RECORDS CONTINUE	S TO	
	ALL 3 DATE FIELDS (MM/DD/YYYY) MUST BE COMPLE	TE. ELSE:	
	CATI HARD CHECK:		
	AN ANSWER MUST BE PROVIDED FOR THIS QUES	STION.	

AN ANSWER MUST BE PROVIDED TO GO TO THE NEXT QUESTION. THIS IS TO PROTECT YOUR PRIVACY TO MAKE SURE NO ONE ACCESSES THE INFORMATION PROVIDED IN THE SURVEY.

CAWI HARD CHECK:

IF W	EB AND I1	_validation check not passed (web mode and DOB does not match)		
I1b.		ou for your time. We need to check our records before continuir 5-831-1718 to complete the survey.	ng. Ple	ase contact
		PROGRAMMER:		
		STATUS 1380 FOR SUP REVIEW AND EXIT WEB INTERVIEW		
		CONFIRMIT STATUS = INCOMPLETE		
IF PI	HONE AND	I1_validation check not passed (telephone mode and DOB does no	t matcl	h)
l1c.		ou for your response. I need to check our records before continuous. Please hold on a moment while I get my supervisor.	uing tl	ne
		RD CHECK: BEFORE PROCEEDING, CONTACT SUPERVISOR FOR ATION CONFIRMATION	OR	
		I1_validation check not passed (telephone mode and DOB does no D PASSED	t matcl	h) AND
I1d.		ISOR: PLEASE VALIDATE THE RESPONDENT IDENTITY USING CONTACT INFORMATION AVAILABLE	ADDR	ESS OR
	CORREC	CT RESPONDENT	1	GO TO I1f
	WRONG	RESPONDENT	0	GO TO I1e
I1d =	0 (wrong r	espondent)		
l1e.	represen	ou for your response. There may be a problem with some of our stative from Mathematica will give you a call to verify our inform the best number to reach you?		ds. A
l1e.	represer What is t	tative from Mathematica will give you a call to verify our inform		ds. A

I1d = 0 (wrong respondent)

I1h. We need to review and confirm our records before continuing with the interview. Thank you for your help.

PROGRAMMER BOX I1d:

IF I1d = 0: UPDATE SMS STATUS 1400 FOR LOCATING (WRONG RESPONDENT) AND EXIT INTERVIEW

CONFIRMIT STATUS = INCOMPLETE

CONFIRMIT DIALDISP = 40 (PHYSICAL/COGNITIVE BARRIER)

EXIT AND PULL CASE FROM CATI BY SETTING LOCTYPE = 4 AND SCHEDULING THE CASE TO THE YEAR 2053.

RESET TO BLANK UPON RE-ENTRY OF THE CASE

I1d = 1 (correct respondent)

A. Employmen

ALL			
A1.	The first questions are about current or recent jobs.		
	Are you currently working at a job for pay, or self-employed?		
	Yes	1	
	No	0	
ALL			
FILL	MONTH WITH 3 MONTHS PRIOR TO SURVEY		
A2.	Were you working at a job for pay, or self-employed, in [MONTH	l]?	
	Yes	1	
	No	0	
ALL			
A3.	Some people have challenges that make it hard to find a new jo First, please think about the challenges you may have had findi Did any of the following make it hard for you to find or keep a jo	ng or qualify	ing for a job.
		No	Yes
a. (Could not find work or lack of jobs available in the area	0	1
b. [Oo not have the right schooling	0	1
с. [Oo not have the right job search skills or experience		
	or example: resume writing, interviewing, or networking	0	
F	or example. resume whing, interviewing, or networking	U	1
	Have difficulty speaking, reading, and/or writing English	0	1

A4.	Next, consider any circumstances that might have made it hard f job. Did any of the following make it hard for you to find or keep		
		No	Yes
a.	Physical or mental health challenges (including a disability)	0	1
b.	Housing problems For example: homelessness, unstable housing or no regular place to stay, or no affordable housing	0	1
C.	Transportation issues or problems		
	For example: no car or no public transportation available, transportation costs too much, public transportation takes too much time	0	1
d.	Family responsibilities, like caring for children, spouse, or a parent	0	1
	job <u>in the last year?</u> Yes		
IF /	Yes		
IF /	Yes		

B. Intervention Information (Recruitment)

FILL SNAP E&T PROGRAM NAME BY SITE

B0. Next, we're going to ask you some questions about communication you might have received about the [SNAP Employment & Training program/E&T PROGRAM NAME], encouraging you to enroll and participate.

If you are now participating in the [SNAP E&T program/E&T PROGRAM NAME], please answer the following questions only considering the information you received about the program <u>before</u> you joined.

The [SNAP E&T program / E&T PROGRAM NAME] helps SNAP participants gain skills and find work, providing participants access to employment training and support services.

T1	LΟ	R	Τ	2

FILL TIME RANGE BY SITE

B1. Our records show that we sent you a text in [DATE(S)] inviting you to learn more about [SNAP E&T program/E&T PROGRAM NAME].

Do you remember getting this [email/text]?

Yes1	GO TO B4
No0	GO TO B2

B1 = 0

FILL "text" IF T1 OR T2

B2. The text invited you to learn more about enrolling in SNAP employment and training services.

Does that sound familiar?

Yes1	GO TO B4
No0	GO TO B3

B2 = 0 AND (T1 OR T2)

FILL PHONE NUMBER FROM ADMIN DATA

B3a. [The SNAP E&T program/E&T PROGRAM NAME] sent you a text to XXX-XXX. Is that the correct phone number for you?

/es1	GO 10 B12
No	GO TO B12

((B1 = 1 OR B2 = 1) AND T1) OR CONTROL

IF RA_Status = T1, FILL "Did you visit the Rhode Island SNAP E&T website at the link that was included in the text (https://risnapet.org)?"

IF RA_Status = C, FILL "Have you ever visited the Rhode Island SNAP E&T website (https://risnapet.org)?"

B4. IF RA_Status = T1: Did you visit the Rhode Island SNAP E&T website at the link that was included in the text] (https://risnapet.org)?

IF RA_Status = C: Have you ever visited the Rhode Island SNAP E&T website (https://risnapet.org)?

Yes1	GO TO B7
No0	GO TO B5

B4 = 0 AND T1

B5. Why didn't you visit the website?

Select all that apply

You didn't see a link in the message	1
You were too busy	2
You thought it was spam	3
You meant to visit the website but forgot	4
You didn't know what to do	5
You already had the information they were sending you	6
You weren't interested in participating in the program	7
Something else (SPECIFY)	99

B6.	Our records indicate you didn't respond to this text.
	Why didn't you respond?
	Select all that apply
	You were too busy to respond1
	You thought it was spam2
	You meant to respond but forgot3
	You didn't know what to do4
	You already had the information they were sending you5
	You weren't interested in participating in the program6
	Something else (SPECIFY)99
	PROGRAMMER BOX B6
	IF B4 = 1 GO TO B7a
	ELSE GO TO B9
B4 =	1 (CONTROL OR T1 OR T2 ONLY)
Б7а.	How much do you agree or disagree with the following statements regarding the webs
	You understood how to navigate the website.
	Strongly disagree1
	Disagree2
	Neither agree nor disagree3
	Agree4
	Strongly agree5

B4 =	1 (CONTROL OR T1 OR T2 ONLY)	
B7b.	It was clear to you what you were supposed to do on the website to be conne provider.	ected to a
	Strongly disagree1	
	Disagree2	
	Neither agree nor disagree3	
	Agree4	
	Strongly agree5	
B4 =	1 (CONTROL OR T1 OR T2 ONLY)	
В7с.	It was easy to submit the form to request more information about providers.	
	Strongly disagree	
	Disagree2	
	Neither agree nor disagree3	
	Agree4	
	Strongly agree5	
	Not applicable6	
B4 =	1 (CONTROL OR T1 OR T2 ONLY)	
B8.	Did you contact any of the providers listed on the website?	
	Yes1	GO TO B9
	No0	GO TO B9
B1 =	1 OR B2 = 1	
B9.	Did you know about [the SNAP E&T program/E&T PROGRAM NAME] before y	ou received a
	text?	
	Yes1	GO TO B10
	No0	GO TO B11

Select all that apply Referral from SNAP staff member (eligibility worker)	
Select all that apply Referral from SNAP staff member (eligibility worker)	
Referral from SNAP staff member (eligibility worker)	
Family member, friend, or colleague	
Another organization in your community	
Flyer	
Community event5	
•	
Computary also (CDECIEV)	
Somewhere else (SPECIFY)99	
ALL	
B11. What is the best way to contact you or provide you with information about [the SNAP program/E&T PROGRAM NAME]?	E&T
Select one only	
Text message1	
Email2	
Phone call3	
Mail4	
Some other way (SPECIFY)99	

IF W	EBLINK COMPLETE (CONTROL OR T1 OR T2) OR REPLY TO TEXT = YES (T3 O	R T4)
FILL	"submitted an online form" IF Control	
FILL	"responded to the text or email" IF T2	
FILL	appropriate state SNAP E&T program name	
B12.	These next questions are about interactions you may have had with E&T staff Department of Human Services (DHS) after you requested more information a [SNAP E&T program name]. Did you receive a call from an E&T staff member at DHS after you [submitted form/responded to the text or email] to learn more information?	bout the
		CO TO D1:
	Yes	GO TO B1
	No0	GO TO B1
IF B1		
FILL	appropriate state SNAP E&T program name	
313.	Did you understand that the call was from [E&T PROGRAM NAME]?	
	Yes1	GO TO B1
	No0	GO TO B1
	appropriate state SNAP E&T program name	
314.	Did you have a conversation with an E&T staff member at DHS to learn about and supports you might be able to receive?	the services
	Yes1	GO TO B1
	No0	GO TO B1
	PROGRAMMER BOX B14	
	IF B14 = 0, GO TO B16	
	IF B14 = 1, GO TO B17	
	IF B13 = 0 GO TO B15	
IF B1	.2 = 0	
FILL	appropriate state SNAP E&T program name	
B15.	[E&T PROGRAM NAME] called you at XXX-XXX-XXXX. Is that the correct photogou?	ne number fo
	Yes1	GO TO C1
	No0	GO TO C1

IF WEBLINK COMPLETE (CONTROL OR T1 OR T2) OR REPLY TO TEXT/EMAIL = YES (T3 OR T4) AND B14 = 0

FILL appropriate state SNAP E&T program name

B16. Why didn't you have this conversation?

Select all that apply

You were too busy to talk	1
You thought it was a spam call	2
You meant to call back but forgot	3
You tried calling back but was unable to reach [E&T program name]	4
You didn't understand how the interview responses would be used	5
You weren't interested in participating in the program	6
Other (SPECIFY)	99

IF WEBLINK COMPLETE (CONTROL OR T1 OR T2) OR REPLY TO TEXT = YES (T3 OR T4) AND B14 = 1

B17. How much do you agree or disagree with the following statements regarding the phone conversation you had?

		Strongly disagree	Disagr ee	Neither agree nor disagree	Agree	Strongly agree
a.	The questions you were asked helped you better understand your own needs or goals related to your career and employment	1	2	3	4	5
b.	The questions you were asked were easy for you to understand and answer	1	2	3	4	5
C.	It was easy for you to find a time to connect with the E&T staff member at DHS to have this phone conversation	1	2	3	4	5
d.	The phone conversation was a good use of your time	1	2	3	4	5
e.	You preferred talking with someone one-on-one more than answering questions online on your own	1	2	3	4	5
f.	The phone conversation helped you understand what services and support you could receive	1	2	3	4	5

PROGRAMMER BOX B17

IF ASSESSMENT = 1 GO TO B18

ELSE GO TO C1A

B14 = 1 OR B8 = 1

FILL "These next few questions ask about the referral to [SNAP E&T Service Provider] you received at the end of your phone conversation with a staff member at DHS.] if B14 = 1

FILL "SNAP E&T SERVICE Provider" with appropriate name based on referral

FILL "referral you received" if B14 = 1

FILL "the provider you selected and contacted" if B8 = 1

B18. [These next few questions ask about the referral to [SNAP E&T Service Provider] you received at the end of your phone conversation with a staff member at DHS.]

How much do you agree or disagree with the following statements regarding the [referral you received/the provider you selected and contacted]?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a. It was easy for you to identify we provider might provide the serve and supports to meet your need.	vices	2	3	4	5
 It was clear to you who you co contact to start receiving service and support from [SNAP E&T Service Provider] 		2	3	4	5
 It was clear to you what your n steps were to receive services support at [SNAP E&T Service Provider] 	and	2	3	4	5
 d. It was easy for you to get in too with someone at [SNAP E&T Service Provider] 	uch 1	2	3	4	5

B14 = 1 or B8 = 1

FILL "SNAP E&T Service Provider" with appropriate name based on referral if B14 = 1

FILL "the provider you selected" if B8 = 1

B19. Have you received any services or support from [SNAP E&T Service Provider/the provider you selected]?

Yes1	GO TO B21
No0	GO TO B20

PRO	GRAMMER: Randomize response options
B20.	Why haven't you received services or support from [SNAP E&T Service Provider/the provider you selected]?
	Select all that apply
	You weren't able to get in touch with someone [at SNAP E&T Service Provider]1
	You had transportation issues or problems
	For example: no car or public transportation available, transportation costs too much, public transportation takes too much time2
	The services and support didn't match your needs3
	You didn't think the services and support would help you find a job4
	You've received similar services and support before and didn't find them valuable5
	You got a job6
	You had housing issues or moved7
	You had physical or mental health challenges (including a disability)8
	You needed to care for a child or family member9
	Some other reason (SPECIFY)99
B14 :	= 1 OR B8 = 1
FILL	"SNAP E&T Service Provider" with appropriate name based on referral if B14 = 1
FILL	"you were referred to" if B14 = 1
FILL	"the provider you selected" if B8 = 1
B21.	How much do you agree or disagree with the following statement about the [[SNAP E& Service Provider] you were referred to/provider you selected]?
	The [SNAP E&T Service Provider/provider you selected] was a good fit for your needs interests.
	Strongly disagree1
	Disagree2
	5104g100
	Neither agree nor disagree3

C. Program Participation

C1a.	Which of the following describes your status with the [SNAP Employment & T program/E&T PROGRAM NAME]?	· ammig
	You are currently receiving services1	GO TO C2
	You are not currently receiving services2	GO TO C1b
C1a	= 2	
C1b.	Have you received <u>any</u> services from the [SNAP E&T program/E&T PROGRAM last 3 months?	I NAME] in the
	Yes1	GO TO C2
	No0	GO TO C2
		00 10 02
FILL	"Besides the [SNAP E&T program/E&T PROGRAM NAME] are" / "other" IF C1a = 1 c "Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receiving	r C1b = 1 ng services
FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job?	r C1b = 1 ng services lp you
FILL FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job? Yes	r C1b = 1 ng services
FILL FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job?	r C1b = 1 ng services lp you
FILL FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job? Yes	r C1b = 1 ng services lp you
FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job? Yes	r C1b = 1 ng services lp you
FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job? Yes	r C1b = 1 ng services lp you
FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job? Yes	r C1b = 1 ng services lp you
FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job? Yes	r C1b = 1 ng services lp you
FILL FILL	"Are" IF C1b = 0 appropriate state SNAP E&T program name [Besides the [SNAP E&T program/E&T PROGRAM NAME] are/Are] you receivi from any [other] providers to help you further your education or training or he prepare for or find a job? Yes	r C1b = 1 ng services lp you

IF C1a = 1 OR C1b = 1 OR C2 = 1

IF C1a or C1b = 1, fill "services from the SNAP E&T program" or "services from E&T PROGRAM NAME" IF C2 = 1 and C1a = 0 and C1b = 0, fill "those services"

PROGRAMMER: Randomize response options

C3. What were the main reasons you decided to receive [services from [the SNAP E&T program/E&T PROGRAM NAME]/those services]?

Select all that apply

To keep SNAP benefits	1
To receive help with child care	2
To get help with the costs of training or employment	3
To improve your English	4
To gain job search skills	5
To learn about self-employment (for example: how to start your own business)	6
To earn a certification/credential/license	7
To gain work experience	8
To get promoted	9
To get a raise	10
To get a job	11
To find a better job	12
Some other reason (SPECIFY)	

IF (C1a = 2 AND C1b=0) OR C2 = 0 AND B19 = 0

PROGRAMMER: Randomize response options

C4. What were the main reasons you haven't received services from [the SNAP E&T program/E&T PROGRAM NAME]?

Select all that apply

You lacked information about the program	1
The program didn't match your needs	2
You had transportation issues or problems	
For example: no car or public transportation available, transportation costs too much, public transportation takes too much time	3
You didn't think the program would help you find a job	4
You got a job	5
You had physical or mental health challenges (including a disability)	6
You had housing issues or moved	7
You needed to care for a child or family member	8
Some other reason (SPECIFY)	99

IF C1	1b = 1		
PRO	GRAMMER: Randomize response options		
C5.	What were the main reasons you stopped receiving services from [the SNAP E&T program/E&T PROGRAM NAME]?		
	Select all that apply		
	The program didn't match your needs1		
	You didn't think the program would help you find a job2		
	You got a job3		
	You had transportation issues or problems		
	For example: no car or public transportation available, transportation costs too much, public transportation takes too much time4		
	You had physical or mental health challenges (including a disability)5		
	You needed to care for a child or family members6		
	You had housing issues or moved7		
	You completed the program8		
	You did not complete the program, but you no longer needed services9		
	Some other reason (SPECIFY)99		
IF C1	1a = 1 or C1b = 1		
If eve	er received services		
C6a.	The next questions are about the [SNAP E&T program/E&T PROGRAM NAME] program offerings.	am	
	For each category, please rank your satisfaction with the [SNAP E&T program/E&T PROGRAM NAME].		
	Training location and times		
	Very satisfied1		
	Satisfied2		
	Neither satisfied nor dissatisfied3		
	Dissatisfied4		

Very dissatisfied.....5

IF C1	a = 1 or C1b = 1		
If eve	er received services		
C6b.	Online training or meeting options		
	Very satisfied	1	
	Satisfied	2	
	Neither satisfied nor dissatisfied	3	
	Dissatisfied	4	
	Very dissatisfied	5	
IF C1	a = 1 or C1b = 1		
If eve	er received services		
6с.	Support with career planning or job placement services		
	Very satisfied	1	
	Satisfied	2	
	Neither satisfied nor dissatisfied	3	
	Dissatisfied	4	
	Very dissatisfied	5	
IF C1	a = 1 or C1b = 1		
If eve	er received services		
6d.	Additional support services, for example transportation	on assistance or child care	
	Very satisfied	1	
	Satisfied		
	Neither satisfied nor dissatisfied		
	Dissatisfied		

IF C1	a = 1 or C1b = 1	
If eve	er received services	
C6e.	Customer service and availability of [SNAP E&T progra	um/E&T PROGRAM NAME] staff
	Very satisfied	1
	Satisfied	2
	Neither satisfied nor dissatisfied	3
	Dissatisfied	4
	Very dissatisfied	5
IF C1	La = 1 or C1b = 1	
If eve	er received services	
C6f.	The number of [SNAP E&T program/E&T PROGRAM Na speak your preferred language	AME] staff who look like you or wh
	Very satisfied	1
	Satisfied	2
	Neither satisfied nor dissatisfied	3
	Dissatisfied	4
	Very dissatisfied	5
IF C1	La = 2 and C1b = 0	
If nev	ver received services	
C7a.	The next questions are about the [SNAP E&T program/ offerings.	E&T PROGRAM NAME] program
	For each category, please indicate whether the item wo participate in the [SNAP E&T program/E&T PROGRAM	
	More convenient training location and times	
	Much more likely to participate	1
	More likely to participate	2
	Unlikely to affect your participation	3

IF C1a = 2 and C1b = 0

If ne	ver received services	
C7b.	More online training or meeting options	
	Much more likely to participate	1
	More likely to participate	2
	Unlikely to affect your participation	3
IF C1	1a = 2 and C1b = 0	
If nev	ver received services	
 С7с.	More support with career planning or job placement services	
	Much more likely to participate	1
	More likely to participate	
	Unlikely to affect your participation	
	1a = 2 and C1b = 0 ver received services	
C7d.	Additional support services, for example transportation assistance or add	
	Much more likely to participate	
	More likely to participate	
	Unlikely to affect your participation	3
IF C1	1a = 2 and C1b = 0	
If nev	ver received services	
C7e.	Additional [SNAP E&T program/E&T PROGRAM NAME] staff training and a	availability
C7e.	Additional [SNAP E&T program/E&T PROGRAM NAME] staff training and a Much more likely to participate	-
C7e.		1

	La = 2 and C1b = 0
If nev	ver received services
C7f.	More [SNAP E&T program/E&T PROGRAM NAME] staff who look like you or who speak your preferred language
	Much more likely to participate1
	More likely to participate2
	Unlikely to affect your participation3
ALL	
Fill "c	consider" IF C1a = 2
Fill "c	continue" IF C1a = 1
C8.	Are there any other program offerings or features not mentioned that would make you more likely to [consider/continue] participating in [the SNAP E&T program/E&T PROGRAM NAME]?
	Yes1
	No2
C8 =	1
Fill "c	consider" IF C1a = 2
Fill "c	continue" IF C1a = 1
C9.	Tell us more about the program offerings or services that you feel would make you more likely to [consider/continue] participating in [the SNAP E&T program/E&T PROGRAM NAME].

D. Respondent Characteristics

0.	Finally, we have some questions about your background.
LL	
	What is your gondow?
1.	What is your gender? Select all that apply
	Male1
	Female
	Non-binary/third gender
	You use another term (SPECIFY)99
	You do not wish to answerr
LL	
	Are you of Hispanic, Latino/a, or Spanish origin?
	Are you of Hispanic, Latino/a, or Spanish origin? No, not of Hispanic, Latino/a, or Spanish origin
	No, not of Hispanic, Latino/a, or Spanish origin1
LL	No, not of Hispanic, Latino/a, or Spanish origin1
LL 3.	No, not of Hispanic, Latino/a, or Spanish origin
	No, not of Hispanic, Latino/a, or Spanish origin
LL	No, not of Hispanic, Latino/a, or Spanish origin
LL	No, not of Hispanic, Latino/a, or Spanish origin
 LL	No, not of Hispanic, Latino/a, or Spanish origin
LL	No, not of Hispanic, Latino/a, or Spanish origin

ALL

D4. What is the highest degree or level of school you have completed?

Select one only

Other (SPECIFY)	99
Master's degree (for example: MA/MS) or higher (for example: MD, PhD)	10
Bachelor's degree or equivalent (for example: BA/BS)	9
Associate's degree (AA)	8
Business degree/certificate	7
Vocational/Technical degree or certificate (for example: cosmetology, automotive repair, Certified Nursing Assistant (CNA))	6
Some college but no degree	5
Adult Basic Education (ABE) certificate	4
High School Diploma or GED	3
8th to 12th Grade, no diploma	2
Less than 8th grade	1

E. END

PROGRAMMER CONTACT INFO FILL BOX
IN THIS SECTION [SM FIRST] IS THE SAMPLE MEMBER'S FIRST NAME
FILL your / you IF (REPTYPE = 0 OR 1) (SAMPLE MEMBER OR TRANSLATOR)
FILL SMFIRSTNAME IF REPTYPE = 2 (PROXY)

PAYMENTTYPE OR SMUPDATENAME OR SMUPDATEADDRESS OR SMUPDATEPHONE OR SMUPDATEEMAIL = 1			
BeginTracking.	Thank you for completing the in need to verify [your/[SM FIRST]'		
		-	
CONTINUE			1 MAILTO
(FIELDCALLS = 0 OF	- 3 AND ((DIALNUMBER = 1, 2, 5, 0 R (FIELDCALLS = 1 AND (CALLINT) 0)))) OR MODE = CAWI)		
MailTo.			
CATI/CAPI			
Would you like us to	send the payment to you or some	one else?	
CAWI			
Would you like your p	payment sent to you or someone e	else?	
SEND TO ME.		1	SKIP BOX MAILTO
SEND TO SOM	MEONE ELSE	2	SKIP BOX MAILTO
REFUSED / DO ALTCONTACT	O NOT WANT PAYMENT S	R	SKIP BOX
	PROGRAMMER SKII	P BOX MAILTO	
IF PAYMEN	TTYPE = 1 (MAIL), GO TO PAYADE	DR.	
IF PAYMEN	TTYPE = 2 (EMAIL), GO TO PAYEN	ΙΔΙΙ	
	TTYPE = 2 (EMAIL), GO TO PATEN TTYPE = 3, GO TO MAILOREMAIL.		

MailorEmail.		
CATI/CAPI		
Should we send the	e thank you payment by mail or electronically b	/ email?
CAWI		
onodia the thank y	ou payment be sent by mail or electronically by	email?
MAIL	ou payment be sent by mail or electronically by	1
MAIL		1
MAIL		1 2 EMAIL.

(PAYMENTTYPE = 1 OR MAILOREMAIL = 1) AND (MAILTO = 1 OR 2) confirm IF MAILTO = 1 AND RESPONDENT ADDRESS LOADED; get IF MAILTO = 2 IF MAILTO = 1 AND RESPONDENT ADDRESS LOADED, FILL NAME AND ADDRESS WITH RESPONDENT INFORMATION; IF MAILTO = 2, DO NOT FILL NAME AND ADDRESS FIELDS PayAddr. CATI/CAPI INSTRUCTION: CONFIRM SPELLING OF NAME AND ADDRESS WITH RESPONDENT BEFORE CONTINUING I would like to [confirm / get] the name and address where we should send the payment. **CAWI** Please [confirm / enter] the name and address where we should send the payment. CATI/CAPI: What is the first name? (STRING 20) First Name CATI/CAPI: Middle initial (STRING 1) Middle Initial CATI/CAPI: Last name? (STRING 30) Last Name CATI/CAPI: What is the first line of the payment address? (STRING (60)) Street Address Line 1 CATI/CAPI: Is there an apartment or unit number for this address? (STRING (60)) Street Address Line 2 CATI/CAPI: Town or city? (STRING (20)) City CATI/CAPI: State? (STRING (2)) State CATI/CAPI: And what is the zip code? _____(STRING (10)) ZIP Code DON'T KNOW......d REFUSED.....r

PROGRAMMER SKIP BOX PAYADDR. ALL RESPONSES GO TO SKIP BOX ALTCONTACTS.

(PAYMENTTYPE = 2 OR MAILOREMAIL = 2) AND (MAILTO = 1 OR 2)

IF MAILTO=1 AND RESPONDENT EMAIL LOADED, SHOW "CONFIRM", "THE EMAIL ADDRESS WE HAVE IS:" AND "IS THIS EMAIL ADDRESS CORRECT" AND FILL EMAIL ADDRESS WITH RESPONDENT EMAIL

IF MAILTO=2 OR NO RESPONDENT EMAIL LOADED, SHOW "PROVIDE ME"

confirm IF MAILTO = 1 AND RESPONDENTEMAIL LOADED; provide me IF MAILTO = 2

The email address we have is: AND Is this email address correct? IF MAILTO = 1, ELSE NO FILL

IF MAILTO = 1 FILL EMAIL ADDRESS

IF MAILTO = 2, DO NOT FILL EMAIL ADDRESS

PayEmail.

CATI/CAPI

INSTRUCTION: CONFIRM EMAIL ADDRESS WITH RESPONDENT BEFORE CONTINUING

I would like to [confirm / get] the email address where we should send the payment.

[The email address we have is:] [RESPONDENTEMAILADDR]

Is this email address correct?

CAWI

Please [confirm / enter] the email address where we should send the payment.

	_(STRING 50)
≣mail	
DON'T KNOW	d
REFUSED	r

PROGRAMMER SKIP BOX PAYEMAIL.
ALL RESPONSES GO TO SKIP BOX ALTCONTACTS.

PROGRAMMER: SKIP BOX ALTCONTACTS

IF SMALTCONTACTS = 1, GO TO ALTCONTACT LOOP.

IF SMALTCONTACTS = 0, GO TO THANKS AND SET DISP = 13.