

APPENDIX C17. SFA POST-PLANNING EMAIL (GROUPS 2A, 2B, AND 3)

This information is being collected to assist the Food and Nutrition Service in understanding school food purchasing practices, the nutritional quality of school meals and snacks, the cost to produce school meals, and student participation and dietary intakes. This is a mandatory collection and FNS will use the information to monitor program operations. 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 0.17 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 22314 ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

SFA DIRECTOR POST-PLANNING EMAIL

Subject: National School Foods Study visit information and document request

Dear [SFA Director]:

Thank you for working with us to schedule the visit for the USDA’s 2024-2025 National School Foods Study.

[If Group 3: As we discussed, we are requesting the following financial statement(s) from you. Please upload [it/them] to [site] by [date] so we can adequately prepare for our visit. [Add instructions for uploading.]

1. Final expense statement for SY 2023-2024 for the SFA. This is part of what is usually called the “statement of income and expense” or the “profit and loss statement.” It is okay to provide the entire statement.
2. [FILL FOR FIRST 3 WKS OF DC FOR TRAINING]: Final revenue statement for SY 2023-2024 for the SFA. This may also be called a “profit” statement.]]

Below are visit dates and individuals we discussed speaking with at each location. If any information was left blank or changes before our visit, please reply to this email with the appropriate information. [If Group 3: See the attached list of data collection activities to help identify the correct staff and to prepare for the visit.]

1. Target week: week of [DATE]
2. FILL G3 ONLY: SFA and district staff we plan to interview

Interview dates and times: [SFA_DateCostIntvDay1:Time ; SFA_DateCostIntvDay2: Time]

Name	Contact Information
[SFADirName]	[SFADirPhone] [SFADirEmail]
[OtherCostRespondent1]	[OtherCostRespondent1Contact]
[OtherCostRespondent2]	[OtherCostRespondent2Contact]

3. Schools included in the study:

School	Address	Visit Day	Principal Contact Information	SchoolNutrition Manager Contact Information
[School1Name]	[School1Street1]	[School1VisitDay]	[School1Principal]	[School1SNM]
[School2Name]	[School2Street1]	[School2VisitDay]	[School2Principal]	[School2SNM]
[School3Name]	[School3Street1]	[School3VisitDay]	[School3Principal]	[School3SNM]

[FILL G3: IF THEY ARE OUT OF SAMPLE OR CENTRAL KITCHENS THEN FILL THE KITCHEN SECTION]

4. We will be reaching out to the following kitchens that provide food to schools in the study:

Facility Name	Address	Supervisor Name	Supervisor Contact Information
[Kitchen1FacilityName]	[Kitchen1Street1]	[Kitchen1Supervisor]	[Kitchen1SupervisorContact]

We will contact you again approximately two weeks before our visit to confirm all of this information [Group 3: and provide a full list of documentation that we will be asking to review on-site].

Please forward this email and the attached documents to the schools selected for the study. These documents stress the importance of the study and describe the study's activities [If Group 2A or 2B: and describe the next steps for principals]. We would greatly appreciate it if you would express your support for the study when you forward the information.

This assessment is not an audit. All information gathered for this study is for research purposes only and will not affect meal reimbursements to participating schools or school meal program benefits of participating households. There are no known benefits to taking part in this study. You may feel uncomfortable answering some questions. You can choose not to answer any question.

Please email or call me if you have any questions. I can be reached at [Email] or [Telephone Number]. If you have any questions about your rights as a research participant, please call HML IRB at 202-246-8504. Thank you in advance for your help and cooperation.

Sincerely,
[Recruiter Name]

Attachments: [IF G3: Data Collection Activities and Respondents], School Nutrition Manager Introduction Letter, Principal Introduction Letter to Schools [IF G2A or G2B: Next Steps for Principals]
