Appendix T.5.

WIC participant experience survey reminders

Public Burden Statement

This information is being collected to assist the Food and Nutrition Service to better understand the implementation and impact of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) modernization efforts on WIC State and local agencies, WIC vendors and WIC participants. This is a voluntary collection and FNS will use the information to monitor and strengthen WIC program modernization efforts. 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 .0167 hours/1 minute per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing 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, Evidence, Analysis, and Regulatory Affairs Office, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306, ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

Email

To: WIC Participant

When: [SCHEDULE]

From: [WIC State agency director OR Mathematica study team]

Subject: Reminder! Complete the WIC Participant Experience Survey

Dear [WIC participant name],

This is a reminder to complete the WIC Participant Experience Survey.

Your input is important to help the WIC program learn more about the WIC participant experience. Your responses will help improve WIC for participants like you! As a reminder, you will receive a \$10 [TYPE] gift card for completing the survey!

Complete the survey

To complete the 10-minute survey, please visit [fill unique web survey URL].

Please complete the survey by [DATE].

If you have any questions or concerns, or if you prefer to complete the survey by phone, please contact the Mathematica study team at [EMAIL]@mathematica-mpr.com or XXX-XXX-XXXX. You can reach the FNS project officer, Carol Dreibelbis, at carol.dreibelbis@usda.gov.

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

Sincerely,

[WIC State Agency Director OR Survey Director, WIC Modernization Evaluation]

Public Burden Statement

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Phone call

Hello. May I speak with [WIC participant name]?

[Confirm speaking with participant]

This is [caller name] calling from Mathematica with a reminder to complete the WIC Participant Experience Survey.

Your input is important to help the WIC program learn more about the WIC participant experience. Your responses will help improve WIC for participants like you! As a reminder, you will receive a \$10 [TYPE] gift card for completing the survey!

Complete the survey

To complete the 10-minute survey, please visit [fill unique web survey URL].

Please complete the survey by [DATE].

If you have any questions or concerns, or if you prefer to complete the survey by phone, please contact the Mathematica study team at [EMAIL]@mathematica-mpr.com or XXX-XXX-XXXX. You can reach the FNS project officer, Carol Dreibelbis, at carol.dreibelbis@usda.gov.

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

Goodbye.

Public Burden Statement

This information is being collected to assist the Food and Nutrition Service to better understand the implementation and impact of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) modernization efforts on WIC State and local agencies, WIC vendors and WIC participants. This is a voluntary collection and FNS will use the information to monitor and strengthen WIC program modernization efforts. 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 .0167 hours/1 minute per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this burden, to: U.S. Department of Agriculture, Food and Nutrition Service, Evidence, Analysis, and Regulatory Affairs Office, 1320 Braddock Place, 5th Floor, Alexandria, VA 22306, ATTN: PRA (0584-xxxx). Do not return the completed form to this address.

Postcard

Dear [WIC participant name],

This is a reminder to complete the WIC Participant Experience Survey.

Your input is important to help the WIC program learn more about the WIC participant experience. Your responses will help improve WIC for participants like you! As a reminder, you will receive a \$10 [TYPE] gift card for completing the survey!

Complete the survey

To complete the 10-minute survey, please visit [fill unique web survey URL].

Please complete the survey by [DATE].

If you have any questions or concerns, or if you prefer to complete the survey by phone, please contact the Mathematica study team at [EMAIL]@mathematica-mpr.com or XXX-XXX-XXXX. You can reach the FNS project officer, Carol Dreibelbis, at carol.dreibelbis@usda.gov.

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

Sincerely,

[Survey Director, WIC Modernization Evaluation]