## Attachment 1: Email

**OMB Control No. 0920-1154**

**Exp. Date 3/31/2026**

Dear **[Insert Role (i.e., Mentor, Youth Group Leader, Tutor, Coach)]** at **[Name of Partner Organization]**,

The US Centers for Disease Control and Prevention’s (CDC) National Center for Injury Prevention and Control (NCIPC) is seeking volunteers from [**INSERT ORGANIZATION NAME**] for a variety of interactive sessions to gather information in Summer 2024 as a part of their Adolescent Mental Health Journey Mapping Project.

Mentors of adolescents aged 13-17, who identify as girls or nonbinary and live in rural areas of the United States, are invited to participate in interviews and focus groups. The purpose is to help the CDC learn about the mental health experiences of adolescents in rural areas. Given your work with adolescents in your community, **[INSERT ORGANIZATION NAME]** identified you as a valued mentor and potential participant.

This project includes 3 types of sessions:

* **Interview:** (conversations between adult mentors and 2-3 project team members available virtually via Zoom and in-person for select locations, including [INSERT LOCATIONS HERE])
* **Focus Groups:** (group conversation with adult mentors, facilitated by the project team available virtually via Zoom and in-person for select locations, including [INSERT LOCATIONS HERE])

Participants who are selected for any of the sessions above will be **receive a $50 Visa gift card per session they attend.**

If you are interested in learning more about this project and seeing if you qualify, please complete the screening survey and consent form at **[Link]** by **[date]**. There is limited availability, so not all mentors will be selected.

If you have any questions, please contact the team at injuryctrengage@cdc.gov*.*

Thank you in advance and we look forward to hearing from you!

Best,

**Partner signature**

The public reporting burden of this collection of information is estimated to average 15 minutes 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. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS H21-8, Atlanta, Georgia 30333 ATTN: PRA (0920-1154).