

Subject: **FDA's National Youth Tobacco Survey at _____ School**
Attach: NYTS_School_Letter&Flyer_2023

Hello **[PRINCIPAL]**,

I am following up on information you recently received regarding your school's participation in the FDA's [National Youth Tobacco Survey](#) (NYTS). I have attached a copy of the letter for your reference. We are looking forward to including your students in NYTS this year!

All sampled schools are encouraged to participate in the survey and in doing so, will receive a monetary incentive and an invitation to a webinar to discuss results. Most importantly, the NYTS has enormous impact on prevention, intervention, and funding activities that can change youth health outcomes for the better. Even saving lives.

NEXT STEPS:

- 1) Review NYTS information.
- 2) Call me, your NYTS Liaison, to schedule the survey. Or you can provide contact information for a "School Coordinator". I will follow-up with them to iron out survey logistics!

Please feel free to reach out with any questions you may have. Thank you for all you do for students every day. I look forward to hearing from you!

[NAME]

[SIGNATURE]

Subject: **FDA's National Youth Tobacco Survey** – Choose your date!
Attach: NYTS_School_Letter&Flyer

Hello **[PRINCIPAL]**,

I am following up regarding your school's participation in the FDA's [National Youth Tobacco Survey](#) (NYTS). I have attached a copy of the original letter for your reference. We are ready for you to select your survey date. You can choose anytime between **[enter current data collection timeframe dates, 2026.]**.

Some quick survey highlights:

- The survey is online and usually takes about **20 minutes**.
- We will sample **just X classes** per grade to participate.
- Your school will receive **\$750 monetary gift** for participation.

Your school's participation in NYTS has enormous impact on prevention, intervention, and funding activities that can change youth health outcomes for the better.

NEXT STEP:

- 1) Respond to this email or call me, your NYTS Liaison, to schedule the survey.
- 2) If you prefer, you can provide contact information for a "School Coordinator". I will follow-up with them to iron out survey logistics!

I look forward to hearing from you soon!

[NAME]

[SIGNATURE]

Public reporting burden for this collection of information is estimated to average 30 minutes per survey, including 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: Office of Operations, Food and Drug Administration, Three White Flint North, 10A-12M, 11601 Landsdown St., North Bethesda, MD 20852, PRASStaff@fda.hhs.gov, ATTN: PRA (0910-0932).