ATTACHMENT J: Head of Household Family Interview Email Reminder
Evaluation of the Community Choice Demonstration

Dear [NAME],

Over the past few weeks, I've been trying to reach you by telephone to request your participation in an interview as part of the evaluation of the Community Choice Demonstration study. You may recall receiving a letter explaining the study in more detail. The study is funded by the U.S. Department of Housing and Urban Development (HUD). Researchers from Abt Associates and the Urban Institute are conducting the study.

When you enrolled in the [MOBILITY PROGRAM] you signed a consent form. The consent form explained that as part of the study, researchers may want to conduct future interviews with you. Researchers are conducting interviews with people like you, who enrolled in the study. These interviews will help HUD and researchers learn how about how the [MOBILITY PROGRAM] is working and your experiences since you enrolled in the study. We are interested in the experiences of everyone who enrolled or applied to enroll in the study because everyone's experiences are unique, even if you did not have the opportunity to receive mobility services or be part of the program.

Researchers plan on visiting [NAME OF CITY] between [DATE RANGE]. I will be calling you in the next few days to discuss this part of the study and set up an appointment. You can also respond to this email or call me at [xxx-xxx-xxxx]. The 90-minute interview can be scheduled at a time and place convenient for you. The interview is voluntary. Your decision about whether or not to participate in the interview will not affect any assistance that you may receive now or in the future. You will receive a gift card in the amount of $40 whether or not you answer all of the questions.

If you would like to see this email reminder translated or to complete this interview in a language other than English, please let us know and we will try to accommodate you. If you need information to be presented in an accessible format, for example, Braille, audio, large type, or sign language interpreters, or a reasonable accommodation (a change or adjustment) so that you can participate, please let us know.

Thank you in advance for your time and assistance with this project.

Sincerely,

[Interviewer Name]

The Paperwork Reduction Act Burden Statement: This collection of information is voluntary and will be used to evaluate the US Department of Housing and Urban Development's Community Choice Demonstration. Public reporting burden for this collection of information is estimated to average 5 minutes per review. 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. The OMB control number for this collection is XXXX-XXXX and it expires XX/XX/XXXX. Send comments regarding this

burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to NAME at XXXX@XXXXX.XXX or call XXX-XXX-XXXX; Attn: OMB-PRA (xxxx-xxxx).

This research is conducted under the authority of the Secretary of the U.S. Department of Housing and Urban Development to undertake programs of research, studies, testing and demonstration related to the mission and programs of HUD (12 USC 1701z-1 et seq.).