

**Evaluation of Food Safety Programs
Attachment 9b Cover Letter (Electronic Survey)**

Dear Participant:

Thank you for agreeing to participate in the Centers for Disease Control and Prevention (CDC) Food Safety Program (FSP) evaluation survey. Your participation is very important. The information you provide will help us better understand the relationship between different levels of funding and FSP effectiveness in the U.S.

Participation in this survey will involve completing an electronic FSP evaluation survey. Please click on the link _____ and enter this password to log-on and complete the FSP survey. Please note that you must have Internet Explorer 6 to complete the survey on-line. The survey will take approximately 2 hours to complete.

Participation in the survey is voluntary. You may choose to drop out of the survey at any time. The survey does not ask for your name or for any other facts that may identify you. The password provided above matches to your name as the health department's contact on a list. This list will be used to follow up with those who have not submitted their surveys. Only authorized CDC staff will have access to this list. We will destroy the list after we have performed our follow-up activities. This will break any links between survey responses and the names of persons who completed the survey.

Please complete the survey by _____. If you require additional information or have questions about the survey, please contact Elizabeth Armstrong-Mensah at 770-488-3464 or at EArmstrongMensah@cdc.gov. Thank you in advance for taking part in this valuable survey. Your response and time is greatly appreciated.

Sincerely,

Elizabeth Armstrong-Mensah, PhD.
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