

## **Attachment I.3: Telephone Script for Retailer Recruitment**

OMB Control Number: 0584-0524  
Expiration Date: 12/31/2022



Interviewer: Hello. Is this [Retailer Contact Name]? My name is [interviewer name] from Abt Associates. I am following up from the email I sent you last week about the 2019-2022 Summer Electronic Benefit Transfer (EBT) Evaluation.

[GRANTEE NAME] recommended we talk to you about your experiences as a retailer with the Summer EBT project.

We think your perspective and experiences with Summer EBT implementation will be important to include as part of the retailer information in the evaluation. Your input could help FNS improve or change project implementation strategies to better support retailers. We hope that you will participate!

We would like to schedule a short (no more than 30 minutes) time to meet with you in-person while we are visiting the [NAME OF GRANTEE REGION and PROPOSED DATES].

During the conversation we'll ask you questions about (1) challenges and best practices in adapting systems for Summer EBT cards, (2) changes made to inventories or other practices in response to Summer EBT, (3) potential project improvements, and (4) experiences with training or guidance received on Summer EBT implementation.

We know you are incredibly busy. Thanks so much for considering our request.

*Retailer confirms times they are available.*

Interviewer: Great. I'll send you an email confirmation to remind you of the interview time.

The Food and Nutrition Service (FNS) is conducting this study to obtain information about the experiences of the Summer Electronic Benefit Transfer (EBT) Project by grantees, retailers, school districts and participants. Participation in this study is voluntary and the information collected will be used to understand how Summer EBT projects are implemented in varying settings. This study does not collect personally identifiable information. Information collected in this study will be kept private to the full extent permitted by law. 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 0584-0524. The time required to provide this information collection is estimated to average 5 minutes per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: USDA/Food and Nutrition Service, Office of Policy Support, 1320 Braddock Place, 5th Floor, Alexandria, VA 22314 ATTN: PRA (0584-0524).