

## PAPERWORK REDUCTION ACT CHANGE WORKSHEET

<b>Agency/Subagency</b> Department of Education, Office of Special Education and Rehabilitative Services	<b>OMB Control Number</b> 1820 -0518	
<b>Enter only items that change</b>		
	<b>Current Record</b>	<b>New Record</b>
<b>Agency form number(s)</b>		
<b>Annual reporting and record keeping hour burden</b>		
<b>Number of respondents</b>		
<b>Total annual responses</b>		
<b>Percent of these responses collected electronically</b>		
<b>Total annual hours</b>		
<b>Difference</b>		
<b>Explanation of difference</b>		
<b>Program Change</b>		
<b>Adjustment</b>		
<b>Annual reporting and record keeping cost burden (in thousands of dollars)</b>		
<b>Total annualized capital/startup costs</b>		
<b>Total annual costs (O&amp;M)</b>		
<b>Total annualized cost requested</b>		
<b>Difference</b>		
<b>Explanation of difference</b>		
<b>Program Change</b>		
<b>Adjustment</b>		
<b>Other change**</b>  Clarification of instructions for completing the data collection table.		
<b>Signature of Senior Officer or designee:</b>	<b>Date:</b>	<b>For OIRA Use</b>  _____  _____

**\*\*This form cannot be used to extend an expiration date  
OMB 83-C**