## PAPERWORK REDUCTION ACT

## CHANGE WORKSHEET

Agency/Subagency U.S. Department of Education, OSERS Title I State Plan for Vocational Rehabilitation Services and Title VI-Part B Supplement for Supported Employment Services		OMB Control Number
		1820-0500
	Enter only items that change Current Record	New Record
Agency form number(s)	NA	NA
Annual reporting and record keeping hour burden		
Number of respondents	80	80
Total annual responses	80	80
Percent of these responses collected electronically	95%	95%
Total annual hours	1,002,000	1,002,000
Difference		0
Explanation of difference		
Program Change		0
Adjustment		0
Annual reporting and record keeping cost burden (in thousands of dollars)		
Total annualized capital/startup costs	0	0
Total annual costs (O&M)	0	0
Total annualized cost requested	0	0
Difference		-
		0
		0
Explanation of difference		0
Explanation of difference Program Change		0
Program Change Adjustment		0
Program Change	o our web site so the form can be submitted (a.ed.gov). Since this is your first time cor- te instructions to obtain a new password. I, which requires the user to submit attach agency's circumstances. There is no sp	0 0 0-0500) with the necessary instructions. ed electronically each year. You can find necting to this link, you will need to click ments for certain sections and other ecific form for any of these attachments,
Program Change Adjustment Other change**Attached is the current for We are currently trying to move this form to this form at the following link <u>http://rsamis.c</u> on the link <i>Info for New Users</i> and follow th Essentially, the current form is the Preprint attachments are not required based on the	o our web site so the form can be submitted (a.ed.gov). Since this is your first time cor- te instructions to obtain a new password. I, which requires the user to submit attach agency's circumstances. There is no sp	0 0 0-0500) with the necessary instructions. ed electronically each year. You can find necting to this link, you will need to click ments for certain sections and other ecific form for any of these attachments,

\*\*This form cannot be used to extend an expiration date

OMB 83-C