# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 2700-0153)

TITLE OF INFORMATION COLLECTION: LaRC Customer Satisfaction Assessment

## **PURPOSE:**

Center leadership desires to seek out customer feedback across all mission areas we support in order to determine, from an integrated perspective, those areas where we may need to take systemic action to improve the technical quality and/or the delivery of our products and services. While feedback may have been collected in a variety of approaches in the past, the benefit of collecting a standard set of information on a periodic basis will provide key inputs to where improvement resources should be focused.

The information to be collected aligns and will provide insight into progress against the Center Strategic Objectives, but will also provide real time performance and customer experiences/perceptions that will enable us to benchmark against like Research and Development government organizations. In addition, the Center maintains registration to both the ISO 9001 and AS9100 International Quality Management Standards and this more structured approach to collecting and documenting customer feedback will support newly-added rigor imposed with the latest updates to these standards.

#### **DESCRIPTION OF RESPONDENTS:**

**TYPE OF COLLECTION:** (Check one)

The Center has selected only its primary customers and partners as targeted respondents. These represent other NASA Centers and Government Agencies, Industry partners and Academic Institutions, such that no small business will be impacted by the assessment.

[]	Customer Comment Card/Complaint Form Usability Testing (e.g., Website or Software Focus Group	<ul><li>[X ] Customer Satisfaction Survey</li><li>[ ] Small Discussion Group</li><li>[ ] Other:</li></ul>		
CE	RTIFICATION:			
I ce	ertify the following to be true:			
	The collection is voluntary.			
	The collection is low-burden for respondents and low-cost for the Federal Government.			
	The collection is non-controversial and does <u>not</u> raise issues of concern to other federal			
	agencies.	taise issues of concern to other reactur		
	The results are <u>not</u> intended to be disseminated	to the public		
	. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u>			
	policy decisions.	inpose of <u>substantiany</u> informing <u>influential</u>		
	ppinions from respondents who have			
	experience with the program or may have exper	<u>-</u>		
Nar	ne:Kathryn Sudderth_			
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10	assist review, please provide answers to the foll	owing question:		

<ul> <li>Personally Identifiable Information:</li> <li>1. Is personally identifiable information (PII) collected</li> <li>2. If Yes, will any information that is collected be included in Privacy Act of 1974? [ ] Yes [ ] No</li> <li>3. If Yes, has an up-to-date System of Records Notice</li> </ul>	luded in records	that are subject to			
<b>Gifts or Payments:</b> Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [X] No					
BURDEN HOURS					
Category of Respondent	No. of Respondents	Participation Time	Burden		
Customers/Partners	30	30min	15 hrs		
Totals	30	30min	15hrs		
FEDERAL COST: The estimated annual cost to the Federal government is\$8500					
If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?					
The Center has selected only its primary customers These represent other NASA Centers and Governm Academic Institutions, such that no small business v	ent Âgencies, I	ndustry partners	and		
Administration of the Instrument  1. How will you collect the information? (Check all the information) (Check all	nat apply)				

[ ] In-person
[X] Mail
[X] Other, Explain
We intend to introduce the survey by initially by letter; however, customers will have the option to provide their feedback via email, web-based survey, or phone conversation in

2. Will interviewers or facilitators be used?  $[\ ]$  Yes [X] No

[X] Web-based or other forms of Social Media

[ ] Telephone

accordance with their preference.

Please make sure that all instruments, instructions, and scripts are submitted with the request.

## Instructions for completing Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback"

**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

**PURPOSE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

**DESCRIPTION OF RESPONDENTS**: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

**TYPE OF COLLECTION:** Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

**Gifts or Payments:** If you answer yes to the question, please describe the incentive and provide a justification for the amount.

## **BURDEN HOURS:**

**Category of Respondents:** Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households;(2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

**No. of Respondents:** Provide an estimate of the Number of respondents.

**Participation Time:** Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

**Burden:** Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

**FEDERAL COST:** Provide an estimate of the annual cost to the Federal government.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

**The selection of your targeted respondents.** Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

**Administration of the Instrument:** Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts are submitted with the request.