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Public Datasources and Tools for Community Health

Paperwork Reduction Act Submission Form

Name of Tool:

Text box

Form Approved
OMB No. 0990-
Exp. Date XX/XX/20XX

Description of Tool:

This description should provide an overview of the tool that is provided (including data elements), how the information was collected (survey, administrative data, crowdsourcing, etc.), de-identification status, examples of how the tool has been used previously).

Text box

(this should allow up to 1,000 characters for free text submission).

HealthData.gov Category Type

Category Drop Down box

Subject Area

Subject Area Drop Down Box

Specialized Data Category Designation

Specialized Data Category Drop Down

Keywords

Text box

Date of First Release

Text box

Date of Last Update (if applicable)

Text box

This button takes the user to a static html page detailing the evaluation criteria used by the data council.

Learn More about
the Evaluation
Criteria

Next

According to the Paperwork Reduction Act of 1995, no persons are 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 0990-. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Health & Human Services, OS/OIO/PRA, 200 Independence Ave., S.W., Suite 336-E, Washington D.C. 20201, Attention: PRA Reports Clearance Officer