## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 1800-0011)

**TITLE OF INFORMATION COLLECTION:** **U.S. Department of Education Reform Support Network Teachers and Leaders/Standards and Assessment Community of Practice Workgroups (2013)**

**PURPOSE:** The U.S. Department of Education (ED) is committed to understanding the utility and relevance of TA provided to Race to the Top (RTT) States through the Reform Support Network (RSN) in order to inform both service and program improvement in ensuring States achieve their Race to the Top goals as authorized by the American Recovery and Reinvestment Act of 2009 (ARRA), Section 14005-6, Title XIV, (Public Law 111-5). The Reform Support Network provides TA to Race to the Top States through a variety of mechanisms including Communities of Practice, Work Groups, Webinars, Convenings, Product Development, and individualized technical assistance.

In support of RTT States, it is important to ensure that all TA provided through RSN is of high quality, relevant, useful, and helpful as States work towards achievement of their RTT goals. The RSN will investigate the utility and transferability of TA provided through the Teacher and Leader/Standards and Assessment Community of Practice Workgroups. The results will help the RSN understand the value and use of work group deliverables such as reports, convenings, and toolkits. The results will also inform how the RSN provides technical assistance support in the future. In order to reduce burden on workgroup participants, the form includes questions tailored for each of two workgroups, Student Learning Objectives (SLO) and Quality Evaluation Rollout (QER), respectively with parallel questions for both groups.

**DESCRIPTION OF RESPONDENTS**: Respondents include all members of the RSN Student Learning Objectives workgroup and Quality Evaluation Rollout workgroups. Surveys will be completed on-line.

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

[ ] Customer Comment Card/Complaint Form [X] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[] Focus Group [ ] Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name:\_\_Aaron Pinter-Petrillo\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To assist review, please provide answers to the following question:

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [X] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No

**Gifts or Payments:**

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** |
| State and Local Education Agency Staff (state/local government) | 29 | 5 minutes | 145 minutes  |
|  |  |  |  |
| **Totals** | **29** | 4 minutes | **2 hours** |

**FEDERAL COST:** The estimated annual cost to the Federal government is \_**$1,000\_**

**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**

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe? [ x] Yes [ ] No

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?

All participants in the SLE and QER workgroups will be invited to respond to the survey.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

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

[ ] Telephone

[ ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [ X ] No