

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 1880-0542)**

**TITLE OF INFORMATION COLLECTION:** Charter School Program’s Resource Center Technical Working Group Meeting Survey

**PURPOSE:**

The U.S. Department of Education (ED) has as one of its many policy goals expanding the number high-quality public school choice options. Specifically, according to Part B section 5201 of the Elementary and Secondary Education Act, two of the established purposes of the Charter School Program (CSP) office are: evaluating the effects of such schools, including the effects on students, student academic achievement, staff and parents, and expanding the number of high-quality charter schools available to students across the nation.

The Charter School Program’s Resource Center is holding a technical working group meeting to discuss sustainable support for high-quality charter schools through charter support organizations.

Surveys will measure satisfaction with the event, and will be performed in person during the conference.

**DESCRIPTION OF RESPONDENTS:**

Respondents will be participants in the conference, and will be representatives from charter school support organizations.

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

- |   |  |
|---|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form         | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software | <input type="checkbox"/> Small Discussion Group                  |
| <input type="checkbox"/> Focus Group                                  | <input type="checkbox"/> 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 OF CONTACT PERSON: Erin Pfeltz

TELEPHONE NUMBER: 202-205-3525

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

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  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  No

**BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden
Conference attendees	30	15 mins	7.5 hrs
<b>Totals</b>	<b>30</b>		<b>7.5 hrs</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$262.50

**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?  
 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?

CSP conference attendees will be asked to complete this survey.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)  
 Web-based or other forms of Social Media  
 Telephone  
 In-person  
 Mail  
 Other, Explain
2. Will interviewers or facilitators be used?  Yes  No

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