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

TITLE OF INFORMATION COLLECTION: HSG-SSDCoP Follow-up Needs-Sensing

#### **PURPOSE:**

The purposes of the follow-up needs-sensing calls are to:

- Gather information on HSGI grantees' current participation in any education-juvenile justice partnerships, initiatives, workgroups, taskforces, etc.
- Gain a better understanding of HSGI grantees' current supportive school discipline related goals and technical assistance needs, and
- Gather information on HSGI grantees' preferences for format and scheduling for the upcoming HSGI bimonthly community calls structure and format.

Information gathered from the follow-up needs-sensing calls will be utilized strictly for planning HSGI-SSDCoP community calls and related follow-up TA activities.

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

The respondents pool is comprised of 16 High School Graduation Initiative grantee project directors.

TYPE OF COLLECTION: (Check one)	
[ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software) [] Focus Group	[ ] Customer Satisfaction Survey [ ] Small Discussion Group [X] Other: <u>Individual Calls</u>

## **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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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:	Robert	V. I	Mayo,	Ph.	D.,	Senior	TA	Consultant	

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	Participation	Burden
	Respondents	Time	
State, local or tribal governments	16	20 minutes	5.5 hrs.
Totals			5.5 hrs.

## **FEDERAL COST:** The estimated annual cost to the Federal government is <u>1176.15</u>

Operational Activities	Costs
Conducting follow-up needs-sensing calls (16 total @ 20 min. = 5.5 hrs.)	862.51
Summarizing information gathered during calls (1 hr.)	156.82
Total for All Operational Activities	1019.33

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 pot	ential
	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?

The list of respondents is finite and the targeted respondent group has been identified. Specifically, the targeted respondents are the 16 HSGI grantee Project Directors we need to collective information from for planning purposes. No sampling plan is necessary.

## **Administration of the Instrument**

7(	ministration of the instrument
1.	How will you collect the information? (Check all that apply)
	[ ] Web-based or other forms of Social Media
	[X] Telephone
	[ ] In-person
	[ ] Mail
	[ ] Other, Explain

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

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.

**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.

**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.

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