

PAPERWORK REDUCTION ACT

CHANGE WORKSHEET

Agency/Subagency ED	OMB Control Number 1894-0006 vs.32 (04855)	
Enter only items that change Current Record		
	New Record	
Agency form number(s)	NA	NA
Annual reporting and record keeping hour burden		
Number of respondents	13,664	13,674
Total annual responses	13,664	13,674
Percent of these responses collected electronically	75%	75%
Total annual hours	498,800	499,700
Difference		900
Explanation of difference		900
Program Change		NA
Adjustment		NA
Annual reporting and record keeping cost burden (in thousands of dollars)		
Total annualized capital/startup costs	NA	NA
Total annual costs (O&M)	NA	NA
Total annualized cost requested	NA	NA
Difference		NA
Explanation of difference		NA
Program Change		NA
Adjustment		NA
<p>Other change**</p> <p>The purpose of this change worksheet is to include the Application for grants for the State Tribal Education Partnership program CFDA 84.415A under generic application 1894-0006. The notice is attached for your information.</p>		
Signature of Senior Officer or designee:	Date:	For OIRA Use
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****This form cannot be used to extend an expiration date**

Certification for Paperwork Reduction Act Submissions

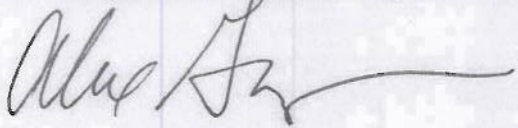
On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9 and the related provisions of 5 CFR 1320.8(b)(3).

The following is a summary of topics, regarding the proposed collection of information that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It uses plain, coherent, and unambiguous language that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention periods for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3) about:
 - (i) Why the information is being collected;
 - (ii) Use of information;
 - (iii) Burden estimate;
 - (iv) Nature of response (voluntary, required for a benefit, or mandatory);
 - (v) Nature and extent of confidentiality; and
 - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected
- (i) It uses effective and efficient statistical survey methodology (if applicable); and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of these provisions, identify the item(s) and explain the reason in the Supporting Statement.

All submitted information collection requests must be complete and approved by your office. By signing this certification, RIMS has been authorized to post the information collection request to EDICSWEB for public comment. If this collection should not be publicly available, please provide reasons to RIMS via e-mail to ICDocketMgr@ed.gov when you notify RIMS of your official EDICS submittal. Information collections tied to a proposed or draft rule are not shared with the public until the publication date of that rule.

Signature of Principal Office Official or Designee 	Date: 4/30/12
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