


## PAPERWORK REDUCTION ACT CHANGE WORKSHEET

|   |                  |                                       |            |
|---|------------------|---------------------------------------|------------|
| Agency/subagency<br><br>Corporation for National and Community Service  |                  | OMB Control Number<br><br>3045 - 0122 |            |
| <i>Enter only items that change</i>   |                  |                                       |            |
|   |                  | Current record                        | New record |
| Agency form number (s)<br>N/A   |                  |                                       |            |
| <b>Annual reporting and recordkeeping hour burden</b>   |                  |                                       |            |
| Number of respondents   |                  |                                       |            |
| Total annual responses  |                  |                                       |            |
| Percent of these responses collected electronically   | %                |                                       | %          |
| Total annual hours  |                  |                                       |            |
| Difference  |                  |                                       |            |
| Explanation of difference   |                  |                                       |            |
| Program change  |                  |                                       |            |
| Adjustment  |                  |                                       |            |
| <b>Annual reporting and recordkeeping cost burden (in thousands of dollars)</b>   |                  |                                       |            |
| Total annualized Capital/Startup costs  |                  |                                       |            |
| Total annual costs (O&M)  |                  |                                       |            |
| Total annualized cost requested   |                  |                                       |            |
| Difference  |                  |                                       |            |
| Explanation of difference   |                  |                                       |            |
| Program change  |                  |                                       |            |
| Adjustment  |                  |                                       |            |
| <b>Other changes**</b>  |                  |                                       |            |
| Adding two questions to original list, should not add any time to the collection as they require very brief answers. Questions are: "Special skills required" and "May we have your permission to post on our website?" |                  |                                       |            |
| Signature of Senior Official or designee:<br>  | Date:<br>8/23/12 | For OIRA Use<br>_____<br>_____        |            |

\*\* This form cannot be used to extend an expiration date.