# Request for Approval under the "Generic Clearance for the Collection of Qualitative Feedback on the Service Delivery of the Consumer Financial Protection Bureau" (OMB Control Number: 3170-0024)

# TITLE OF INFORMATION COLLECTION:

Financial Educator	Forum	<b>End-of-Session</b>	Survey
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### **PURPOSE:**

Evaluation to measure participant response to the training "Issues in Debt Collection,"

being provided to participants by Bureau staff.

# **DESCRIPTION OF RESPONDENTS:**

Approximately 150 field practitioners from the Department of Defense to include staff financial educators and Judge Advocate General officers and staff. The respondents will be a mix of GS employees, active duty and reserve military, and contract staff. This request is being made to obtain approval to collect this information from non-military and non-Federal respondents, about 40% of the attendees.

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

#### **CERTIFICATION:**

By submitting this document, the Bureau certifies 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 not 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.
- 7. The results will not be used to measure regulatory compliance or for program evaluation.

# **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 [X ] Not Applicable

3. If Applicable, has a System or Records Notice by [ ] Yes [ ] No [X ] Not Applicable	peen published?		
Gifts or Payments:			
Is an incentive (e.g., money or reimbursement of exprovided to participants? [ ] Yes [X] No	xpenses, token of	f appreciation)	
BURDEN HOURS			
Category of Respondent	Number of Respondents	Participation Time	Burden Hours
DoD Contract Staff	60	3 min.	3 hours
Totals	60	3 min	3 hours
The selection of your targeted respondents  1. Do you have a customer list or something similar respondents and do you have a sampling plan for [X] Yes  [] No	selecting from t	his universe?	
If the answer is yes, please provide a description of the answer is no, please provide a description of how respondents and how you will select them?			
The customer list will be the Forum Attendees.			
Administration of the Instrument  1. How will you collect the information? (Check all [x] Web-based or other forms of Social Medical [a] Telephone [a] In-person [a] Mail [a] Other, Explain  2. Will interviewers or facilitators be used? [a] Yes	a (email fillable	form to participa	ants)