

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 3090-0297)**

**TITLE OF INFORMATION COLLECTION:** 4Q Satisfaction Survey for Performance.gov-Req-2.

**PURPOSE:**

To collect feedback about customer satisfaction and task completion for Performance.gov. The results of the survey will be used internally to improve service.

**DESCRIPTION OF RESPONDENTS:**

A random selection of individuals who visit the website will be asked to complete a 5-6 question survey. Participation is voluntary and anonymous.

**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 ( <i>e.g.</i> , 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: Kris Rowley

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, will any information that is collected be included in records that are subject to the Privacy Act of 1974?  Yes  No
3. If Yes, has an up-to-date System of Records Notice (SORN) 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
Individuals or households	1980	2 minutes	66
<b>Totals</b>	1980	2 minutes	66

**FEDERAL COST:** The estimated annual cost to the Federal government is minimal, as we will be using the free version of the vendor's (the vendor is iperceptions) customer satisfaction survey software. They have several versions of varying costs, but the free version will satisfy our needs.

**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?

Only people who directly visit Performance.gov will be invited to take the survey. We plan to randomly invite approximately 50% of visitors, with a maximum of 130 people per month to complete the survey. The survey will run until the approval expires on 6/30/2015.

### **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