

**CUSTOMER SATISFACTION SURVEY AND CONFERENCE
EVALUATION CLEARANCE FORM**

A. SUPPLEMENTAL SUPPORTING STATEMENT

A.1. Title: The FedCASIC 2013 Feedback Survey	
A.2. Compliance with 5 CFR 1320.5: Yes _____ No <input checked="" type="checkbox"/> <p>Respondents will be asked to complete this survey within 3 weeks. Because the survey is a short, one time opinion survey, collection in fewer than 30 days is considered appropriate.</p>	A.3. Assurances of confidentiality: No assurance of confidentiality is being made.
A.4. Federal cost: \$ 2, 330 (20 hours of BLS employee work)	A.5. Requested expiration date (Month/Year): 06/2013
A.6. Burden Hour estimates: a. Number of Respondents: 500 a.1. % Received Electronically 100% b. Frequency: One-time c. Average Response Time: 5 minutes d. Total Annual Burden Hours: 42 hours	A7. Does the collection of information employ statistical methods? <input checked="" type="checkbox"/> No _____ Yes (Complete Section B and attach BLS review sheet).

A.8. Abstract:

The Bureau of Labor Statistics (BLS) and the US Census Bureau are jointly sponsoring the 2013 FedCASIC Workshop March 19-21, 2013 at BLS. The workshop provides government survey professionals with an opportunity to share ideas and experiences related to the use of computers in data collection and processing. Attendance is open to representatives of government agencies and contractors who provide software support to government CASIC surveys.

Organizers of the conference would like to seek feedback from everyone who either pre-registered or attended the conference without pre-registering, in order to improve the conference for next year. We would like to find out what people thought of the sessions and get suggestions for topics for next year. We will also gather demographic information about the attendees so we can better understand the groups of people who attend.

Our sample will be everyone who registered for or attended the conference. The survey will use a skip pattern so that those who were not able to attend will not be asked for feedback on this year's sessions, but will be asked for their ideas for next year.

We will allow three weeks for the data collection (from survey invitation to the closing of the survey). We will send potential respondents the survey invitation via email. We will follow-up on email addresses that bounce and send the survey invitation to corrected email addresses. We will also send two follow-up emails to non-respondents, one during the second week, and one during the third week.

All of our responses will be collected via web (using Survey Monkey). We will include the required warning about storing data on a third-party server. We expect that it will take the respondents an average of five minutes to complete the survey. The following statement will be included in the introduction to the survey:

“Your participation in this survey is voluntary. We estimate that it will take you 5 minutes to complete this survey. We are collecting this information under OMB Number 1225-0059. Without this currently-approved number, we could not conduct this survey. (Expiration: January 31, 2016).”

We are only using the results of this survey **for planning purposes**. We will share the results with those planning the conference from other agencies.

We are not employing statistical methods because they are not relevant to the goals of the survey.

Attached please find copies of:

- The initial invitation email
- The first and second follow-up emails
- A copy of the survey

Program Official	Date	Departmental Clearance Officer	Date

B. SURVEYS AND EVALUATIONS EMPLOYING STATISTICAL METHODS

B.1

Sample Frames:

Limitations of the Sample Frames:

Expected Response Rates:

B.2

Sample Size:

Sample Allocation:

Sample Selection:

Procedure for Sample Selection:

B.3

Methods to Reduce Non-Response:

Survey Distribution Procedures:

B.4

Test of Procedures:

B.5

<u>Name</u>	<u>Agency/Company/Organization</u>	<u>Telephone Number</u>
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U.S. DEPARTMENT OF LABOR

**Bureau of Labor Statistics Concurrence of Customer Satisfaction Surveys Employing
Statistical Methods**

TO:	DATE:	FAX:
[Enter program sponsor contact]	____ / ____ / ____	____ - ____ - ____
FROM:	PHONE	
[Enter name of BLS reviewer]	____ - ____ - ____	
ACTION: Review the attached report proposal, indicate approval or disapproval and return to the Sponsoring agency or program. Comments shall not be made on the proposed report but in the comments space below.		
TITLE OF SURVEY OR EVALUATION		
CLEARANCE		
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved (See comments below) <input type="checkbox"/> Approved with caveats (See comments below)		
COMMENTS Think! Privacy Act		
(Insert additional pages as needed)		
(Attach sheet if additional space is necessary)		
Disclaimer: BLS is approving only the statistical methodology as presented in the written documentation, and not necessarily passing judgment on the questionnaire itself nor on the necessity to conduct the collection of information.		
SIGNATURE OF BLS REVIEWER		DATE
		____ / ____ / ____