

**Request for Approval under the “Generic Clearance for the  
Collection of Routine Customer Feedback”  
(OMB Control Number 0690-0030)**

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**TITLE OF INFORMATION COLLECTION:** NOAA Satellite Conference 2013 Feedback Survey

**PURPOSE:** This post-conference user feedback survey will be used to evaluate the effectiveness of the format, the timeliness and the relevance of the content of the 2013 National Oceanic and Atmospheric Administration (NOAA) Satellite Conference (the premier environmental satellite users’ event in the Western Hemisphere). NOAA/National Environmental Satellite, Data, and Information Service will be hosting this conference at NOAA Center for Weather and Climate Prediction (NCWCP) in College Park, MD on April 8-12, 2013. The information from this survey will also be used to plan the format and content for the next conference, which will be coordinated and sponsored by NOAA.

**DESCRIPTION OF RESPONDENTS:** We would like to request a feedback about this conference from all registered attendees, exhibitors, partners, staff, speakers, etc. We have a list of them from the registration.

**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 (e.g., 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: Natalia Donoho (User Services Coordinator)

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
Federal government	300	15	75
Private Sector	100	15	25
<b>Totals</b>	<b>400</b>	<b>30</b>	<b>100</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is **\$480** (10 staff hours at \$48/hour).

**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?

**In addition to our customer relations database (mentioned above), which includes federal employees and members of the private sector, we added persons from previous conference lists who are not currently in our database and sent invitations to other applicable NOAA offices. The respondents will receive an email with a link to the survey.**

**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

**Please submit all instruments, instructions, correspondences (emails, letters, etc.) to respondents, and scripts as separate documents along with this request document.**