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

TITLE OF INFORMATION COLLECTION: Rate the Agend

PURPOSE:

Acquisition 360 is the federal government's first transactional survey of the procurement process. The first iteration of the survey was instituted by Office of Federal Procurement Policy (OFPP) on March 18, 2015. One aspect of the survey is to seek feedback from industry vendors to strengthen the acquisition function to help identify strengths and weaknesses with industry partnerships.

DESCRIPTION OF RESPONDENTS:

 Industry vendors (successful/unsuccessful awardees) who have worked with DOC program and procurement offices

TYPE OF COLLECTION: (Check one)				
[] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software) [] Focus Group	·			
CERTIFICATION:				
 I certify the following to be true: The collection is voluntary. The collection is low-burden for respondents and low-cost for the Federal Government. The collection is non-controversial and does <u>not</u> raise issues of concern to other federal agencies. The results are <u>not</u> intended to be disseminated to the public. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> policy decisions. 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:Virna L. Winters				

To assist review, please provide answers to the following question:

 Personally Identifiable Information: 1. Is personally identifiable information (PII) collected 2. If Yes, will any information that is collected be incomprivacy Act of 1974? [] Yes [] No 3. If Yes, has an up-to-date System of Records Notice 	cluded in records	that are subject to		
Gifts or Payments: Is an incentive (e.g., money or reimbursement of experiment participants? [] Yes [X] No	nses, token of ap	preciation) provid	led to	
BURDEN HOURS				
Category of Respondent	No. of Respondents	Participation Time	Burden	
Industry vendors	50	7 min.	5.8 hrs. (350)	
Totals	50	7 min.	5.8 hrs. (350)	
FEDERAL COST: The estimated annual cost to the If you are conducting a focus group, survey, or pla provide answers to the following questions:	_		<u>please</u>	
 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? [X] Yes [] No 				
If the answer is yes, please provide a description of both the answer is no, please provide a description of how respondents and how you will select them?	,	1 01	,	
Per the OMB Memorandum, Acquisition 360 – <i>Improving th from External Stakeholders</i> dated March 18, 1980, agencie new awards for complex information technology (IT) developing the second seco	es are directed to s	urvey 50 industry v	endors of	
Administration of the Instrument				

How will you collect the information? (Check all that apply)

 [X] Web-based or other forms of Social Media
 [] Telephone
 [] In-person
 [] Mail
 [] Other, Explain

 Will interviewers or facilitators be used? [] Yes [X] No

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

Rate the Agency surveys via *SurveyMonkey* (attached)

Every instrument must have the following displayed –

OMB Control No. 0690-0030 Expiration Date: 06/30/2017

Instructions for completing Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback"

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts are submitted with the request.

Required Additional Information (check ROCIS in IC List for this info --- needed for OCIO staff to complete request)

- 1. Line of Business: General Government
- 2. Sub-function: Legislative
- 3. Privacy Act System of Records: Title: N/A
- 4. Federal Registration citation information: Volume N/A Pg. No. N/A
- 5. Number of respondents for small entities: 50
- 6. Percentage of respondents reporting electronically: 100% (via SurveyMonkey)