Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 3145-0215)

TITLE OF INFORMATION COLLECTION: Volunteer survey for September 2016 Federal Demonstration Partnership (FDP) and NSF Electronic Records Administration (ERA) Forum presentations regarding NSF's Proposal Submission Modernization initiative.

PURPOSE:

The purpose of the survey at the FDP faculty session and the ERA webinar is to collect user opinions on proposal modernization submission activities at the National Science Foundation. The survey aims to provide users with an active voice regarding planning and development activities.

The FDP faculty session is currently scheduled for September 22, 2016. The NSF-hosted webinar is currently scheduled for September 28, 2016.

DESCRIPTION OF RESPONDENTS:

TYPE OF COLLECTION: (Check one)

NSF plans to survey individuals (primarily representatives from universities' offices of sponsored research as well as researchers) who participate in the in-person FDP session and the online, NSF-hosted webinar.

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[] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software [] Focus Group	[X] Customer Satisfaction Survey[] Small Discussion Group[] Other:
CERTIFICATION:	
 I certify the following to be true: The collection is voluntary. The collection is low-burden for respondents ar The collection is non-controversial and does no agencies. 	
4. The results are <u>not</u> intended to be disseminated5. Information gathered will not be used for the pupolicy decisions.6. The collection is targeted to the solicitation of our collection.	irpose of <u>substantially</u> informing <u>influential</u>
experience with the program or may have experience Name: Suzanne H. Plimpton, NSF Reports Clearan	rience with the program in the future.
To assist review, please provide answers to the foll	
Personally Identifiable Information:	

1. Is personally identifiable information (PII) collected? [] Yes [X] No

If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [] No
 If Applicable, has a System or Records Notice been published? [] Yes [] No
 Gifts or Payments:
 Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

BURDEN HOURS

Category of Respondent	No. of	Participation	Burden
	Respondents	Time	
Principal Investigators, Research Administrators	300	10 mins	50
			hours
Sponsored Project Officers, Members of research	150	10 mins	25
community			hours
Totals	450	10 mins	75
			hours

FEDERAL COST: The estimated annual cost to the Federal government is staff time for survey construction and response analysis.

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	om this universe	?
		[X] Ves	$[]N_0$

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?

Potential respondents include members of the research community including faculty members, Principal Investigators, Sponsored Project Officers and other staff including large academic institutions, smaller colleges.

Administration of the Instrument

1.	How will you collect the information? (Check all that apply)
	[X] Web-based or other forms of Social Media
	[] Telephone
	[X] In-person
	[] Mail
	[] Other, Explain
2.	Will interviewers or facilitators be used? [] Yes [X] No

Please make sure that all instruments, instructions, and scripts are submitted with the request.

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.

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.

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.

Please make sure that all instruments, instructions, and scripts are submitted with the request.