

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 1557- 0248)

TITLE OF INFORMATION COLLECTION:

Office of the Comptroller of the Currency - Office of Minority and Women Inclusion (OMWI)
Vendor Outreach Session - Successfully Navigating Alphabet Soup

PURPOSE:

The purpose of the data collection is to assess the effectiveness of the OCC’s OMWI technical assistance outreach. Pursuant to the Dodd-Frank Wall Street Reform and Consumer Protection Act of 2010 (P.L. 111-203), the OCC is required to develop standards for coordinating technical assistance to minority- and women-owned businesses. This collection of information will seek routine customer feedback about the OCC’s OMWI outreach efforts.

The customer feedback survey will be conducted approximately one-week after the participants attend an OCC vendor outreach session. Participants who voluntarily respond to that request for customer feedback survey will be asked whether they would also take part in an additional customer feedback survey 6-month later that will solicit information on whether the vendor outreach session was effective in helping participants enter teaming arrangements.

DESCRIPTION OF RESPONDENTS:

Businesses (also known as vendors) will attend a 3.5 hour workshop to learn about teaming arrangements and participate in a structured, business-to-business networking session to meet potential teaming partners. This event is intended to provide technical assistance for small businesses and women- and minority-owned businesses interested in beginning or increasing their contract opportunities with the federal government through teaming relationships.

There will be 100 businesses attending (mostly small business and/or minority- and women-owned businesses) who responded to a Federal Business Opportunities posting. All businesses that attend will receive the voluntary customer feedback request.

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: **Madelynn Orr**

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, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes No
3. 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 No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector - Businesses (Vendors)	100	.25	25
Private Sector - Businesses (Vendors) Follow-up	75	.25	18.75
Totals			43.75

FEDERAL COST: The estimated annual cost to the Federal government is zero.

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?

The sample will be all of the e-mail addresses (all 150) that were provided when the attendees registered for the event.

The sample for the follow-up survey (to be conducted 6 months after the initial survey) will be those that responded positively on the first survey with respect to whether they were willing to be re-contacted for the follow-up 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 (e-mail)

2. Will interviewers or facilitators be used? Yes No

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

Attached: Survey