## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0642 ExpDate:08/2017)

**TITLE OF INFORMATION COLLECTION:**

NCI Cohort Consortium Steering Committee Elections

**PURPOSE:**

The purpose of the survey is for cohort PIs who are members of the NCI Cohort Consortium to nominate investigators to join the NCI Cohort Consortium Steering Committee in 2016. The Steering Committee is responsible for overall policy and direction of the Cohort Consortium. Some of the duties of Steering Committee members are to review collaborative project proposals, organize the annual meeting, identify new scientific opportunities that could be addressed by the Cohort Consortium and help identify ways to implement them.

As some of our current Steering Committee members cycle off in the next year or two, we are looking to add 3 members to the Steering Committee in keeping with the Steering Committee membership requirements in our bylaws. According to our bylaws which can be found on the website (<http://epi.grants.cancer.gov/Consortia/bylaws.html>),we need a total of 6-9 PIs representing cohorts for cancer research who collectively represent the diversity of the cohorts that make up the NCI Cohort Consortium in terms of institutional and geographical distribution or decade when initiated, among other characteristics. It is anticipated that the election process will occur every 1-2 years are steering committee members complete their terms and cycle off.

**DESCRIPTION OF RESPONDENTS**:

The respondents are 55 Principal Investigators (scientists, researchers and epidemiologists) of large epidemiology cohort studies that are part of the NCI Cohort Consortium.

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [ ] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[ ] Focus Group [ X] Other: nomination of 3 members to the Steering Committee from a pool of 7 candidates\_\_\_\_\_ \_\_\_\_\_\_

**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:\_\_\_Nonye Harvey\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Personally Identifiable Information:**

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

**ESTIMATED BURDEN HOURS and COSTS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **No. of Responses per Respondent**  | **Time per** **Response** **(in hours)**  | **Total Burden****Hours**  |
| Individual | 55 | 1 | 1 / 60 | 1 |
|  |  |  |  |  |
| **Totals** | **55** | 55 |  | **1** |

|  |  |  |  |
| --- | --- | --- | --- |
|  **Category of Respondent** | **Total Burden****Hours** | **Wage Rate\*** | **Total Burden Cost**  |
| PI | 1 | $48.69 | $48.69 |
|  |  |  |  |
| **Totals** |  |  |  |

\*Wage rate for Medical Scientists (Occupation code 19-1042) as found on <http://www.bls.gov/oes/current/oes191042.htm>

**FEDERAL COST:** The estimated annual cost to the Federal government is \_$4,173\_.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary** | **% of Effort** | **Fringe (if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight** | 13/1 | 83,468 | 0.05 |  | 4,173 |
| Total |  |  |  |  | $4,173 |

**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

**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

[ ] In-person

[ ] Mail

[ ] Other, Explain

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