

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp Date: 03/31/2018)

TITLE OF INFORMATION COLLECTION: LRP Ambassador Feedback

PURPOSE: To obtain feedback from Loan Repayment Program (LRP) Ambassadors about their activities reaching out to prospective applicants.

DESCRIPTION OF RESPONDENTS: Respondents will be individuals who have voluntarily agreed to be LRP Ambassadors, i.e., individuals who provide outreach about the NIH Loan Repayment Programs to prospective applicants at their institutions.

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: Ericka Boone, Ph.D.

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

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	1350	1	10/60	225
Totals	1350	1350		225

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	225	\$39.54*	\$8,896.05
Totals	225		\$8,896.05

* Median Pay for Medical Scientists per BLS Occupational Handbook (<http://www.bls.gov/ooh/life-physical-and-social-science/medical-scientists.htm>)

FEDERAL COST: The estimated annual cost to the Federal government is \$16,100.

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Ericka Boone	15-1	\$175,000	2%		\$3,500
Contractor Cost					
One Contractor	n/a	\$180,000	7%		\$12,600
Travel					None
Other Cost					None
Total					\$16,100

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

Previous and current LRP awardees (approximately 9000 individuals) will be invited by email to serve as LRP Ambassadors. A 15 percent response rate is anticipated, based on the response rate to a previous invitation, i.e., 1350 individuals. Those who choose to become Ambassadors will be asked annually at the end of the LRP application cycle period to comment on the number of outreach activities they conducted with prospective applicants.

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