

**Request for Approval under the “DOI Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery”
(OMB Control Number: 1090-0011)**

TITLE OF INFORMATION COLLECTION: Landscape Conservation Cooperatives Performance Evaluation

PURPOSE: The purpose of this information collection is gather information related to the awareness, understanding, attitudes, and experience of partners engaged in the Landscape Conservation Cooperatives (LCC) Network. This information collection will assist the LCC Network leadership in improving future products and communications materials.

The LCC Network is in the process of updating its 2014 Strategic Plan. Included in this new version of the Strategic Plan will be updated goals and objectives for the LCC Network. Additionally, this version of the Strategic Plan will include performance evaluation metrics that are directly tied to these goals and objectives. Through this information collection, we will improve and strengthen the updated Strategic Plan by including performance metrics. The updated plan is to be published in late 2017/early 2018.

The specific information and feedback that we are seeking from the members of the LCC Network includes input on the current draft of the strategic plan and performance evaluation metrics. Respondents will be asked about their preferences for the goals and objectives related to the strategic plan as well as what metrics would be most effective in evaluating the success of the LCC Network.

DESCRIPTION OF RESPONDENTS: Respondents will include partners engaged across the LCC Network, including DOI staff and members of the LCC Steering Committees. Each self-directed, science-driven LCC brings together Federal, State, and local governments along with Tribes and First Nations, non-governmental organizations, universities, and interested public and private organizations.

TYPE OF COLLECTION: (Check one)

- | | |
|---|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input 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 checked="" type="checkbox"/> Other: <u>On-line Survey (see attachments)</u> |

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: Paul Holland

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

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
LCC Network Partners	60	5 mins	5 hrs

FEDERAL COST: The estimated annual cost to the Federal government is: **\$500**. If we receive 60 submissions and it takes 5 minutes to complete each one, then the total burden is approximately \$500.00 assuming a GS-13 step 5 is completing the submissions.

Please note, however, that this custom form is a tool meant to accept submissions in a standard format rather than through the freeform submissions that would otherwise come in by personal email. Thus the existence of this form actually saves the government money by standardizing submissions and decreasing the workload of processing each one.

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.

Participants will include partners engaged across the LCC Network, including DOI staff and members of the LCC Steering Committees. Each self-directed, science-driven LCC brings together Federal, State, and local governments along with Tribes and First Nations, non-governmental organizations, universities, and interested public and private organizations.

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

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 in minutes 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.