

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 3045-0129)**

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**TITLE OF INFORMATION COLLECTION:**

2015 CNCS Research Summit Attendee Feedback Survey

**PURPOSE:** The purpose of this survey is to solicit feedback from attendees of the 2015 CNCS Research Summit on what worked well at this year’s event and what could be improved at next year’s event.

**DESCRIPTION OF RESPONDENTS:** All attendees of the 2015 CNCS Research Summit

**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"/> 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: Joseph Breems

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, will any information that is collected be included in records that are subject to the Privacy Act of 1974?  Yes  No
3. If Yes, has an up-to-date System of Records Notice (SORN) 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
Summit attendees	250	3 minutes	12.5 hours
<b>Totals</b>			

**FEDERAL COST:** The estimated annual cost to the Federal government is \$0.00

**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?

We have a list of all attendees of the Summit, which defines the universe of potential respondents.

### **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.**

See attached instrument

## Instrument

1. Please select the sector that best describes the organization with which you are affiliated.

- Nonprofit/K-12 School/Community Organization
- Philanthropy/Foundation
- Academia/University
- Private Research/Consulting/Think Tank
- Elected Official and Staff
- CNCS Staff
- Other Federal Agency
- State/Local/Tribal Government
- State Service Commission
- Other – Please describe: \_\_\_\_\_

2. Was attending the 2015 CNCS Research Summit worth your time? Please select one.

- Completely
- Mostly
- Somewhat
- Not at all

3. What were the most valuable things you learned at the Summit? (Free response)

4. Which Summit sessions were most conducive to your learning? Select all that apply.

- Keynote speaker
- CNCS program directors panel
- CNCS grantees panel
- Experts panel
- Working Sessions
- Other – Please describe: \_\_\_\_\_

5. What about the Summit could be improved? (Free response)

6. Any additional comments or thoughts on the Summit? (Free response)