## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 3045-0163)

**TITLE OF INFORMATION COLLECTION:**

Learning Management System (LMS) Pre- and Post-test Assessment Questions

**PURPOSE:**

The Corporation for National and Community Service (CNCS) has procured a Learning Management System (LMS) to enhance training and technical assistance at the agency. The Office of Research and Evaluation (R&E) is using this tool to enhance existing methods of teaching and learning about program evaluation and research topics. R&E has programmed 12 Evaluation Core Curriculum courses on the LMS for users to explore interactively. In order to enhance the utility of the courses, R&E would like implement “knowledge checks” in the form of topically focused pre/post-test questions so that participants can identify knowledge gaps that need to be addressed with further learning. This will also enable R&E to see where common learning issues arise, and where additional resources should be targeted.

**DESCRIPTION OF RESPONDENTS**:

Respondents will be anyone who takes one of the 12 LMS courses falling under the Evaluation Core Curriculum on the Office of Research and Evaluation LMS page or in the Office of Research and Evaluation LMS library.

**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: User knowledge check

**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: Adrienne DiTommaso\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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, 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 [X] No

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **Participation Time** | **Burden** |
| LMS course user | Up to 100 | Maximum of 5 minutes per course @ 12 courses maximum |  |
| **Totals** | 100 |  | **100 hours maximum** for maximum number of respondents taking maximum number of courses |

**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:**

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**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

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

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