# XRequest for Approval under the "Fast Track Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0704-0553)

TITLE OF INFORMATION COLLECTION: State of Strategy Conference Facilitation

**PURPOSE:** To improve conference and learn lessons for future conferences

The questions are therefore based on, and align with, the material that is being covered during OSD-Policy's "State of the Strategy" conference, which is focused on DoD foreign policy longterm strategy and risk assessment. The questions would be asked immediately following the conference and are meant to obtain feedback from the academic audience and would be used to inform/improve the next conference. Accordingly, this is anticipated to be a one-time survey.

#### **DESCRIPTION OF RESPONDENTS:**

Individuals who are in attendance for the one-day conference, which could include former

administration officials and senior academics	conference, which could include former
TYPE OF COLLECTION: (Check one)	
[ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software [ ] Focus Group	[ ] Customer Satisfaction Survey [ ] Small Discussion Group [X ] Other:_Feedback Survey (immediately following conference)
CERTIFICATION:	
<ol> <li>I certify the following to be true:</li> <li>The collection is voluntary.</li> <li>The collection is low-burden for respondents at 3. The collection is non-controversial and does not agencies.</li> <li>The results are not intended to be disseminated</li> <li>Information gathered will not be used for the propolicy decisions.</li> <li>The collection is targeted to the solicitation of experience with the program or may have experience</li> </ol>	to the public. urpose of substantially informing influential opinions from respondents who have
Name:_James Truran (OSD-Policy, Strategy and F	Force Development)
To assist review, please provide answers to the following	lowing question:
<ol> <li>Personally Identifiable Information:</li> <li>Is personally identifiable information (PII) coll</li> <li>If Yes, will any information that is collected be Privacy Act of 1974? [ ] Yes [X] No</li> <li>If Yes, has an up-to-date System of Records No</li> </ol>	e included in records that are subject to the

<b>Gifts</b>	or	Pay	ments:
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Is an incentive	e (e	e.g., m	one	y or re	imburse	ement c	of expens	ses, tok	en of a	appred	ciation)	) prov	ided	to
participants?	Γ1	Yes	[X]	No										

#### **BURDEN HOURS**

Category of Respondent	No. of	Participatio	Burden
	Respondents	n Time	
Non-DOD	25	10 mins	4hr
			10min
Totals	25	10 mins	4hr
			10min

**FEDERAL COST:** The estimated annual cost to the Federal government is \_\_\_\_\$600 \_\_\_\_\_

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 pot	tential
	respondents and do you have a sampling plan for selecting from this universe?	
	[X]Yes	l No

The target list is simply the attendees of the conference, which will total 25 non-DOD attendees.

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?

Due to the small cohort (conference attendees) there is no sampling plan. The total number of attendees, and therefore recipients of the survey will not exceed 25 individuals.

## **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

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. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

**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 per row. **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 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.

Submit all instruments, instructions, and scripts with the Request for Approval.