

**Request for Approval under the “Conference, Meeting, Workshop, and Poster  
Session Registration Generic Clearance (OD)”  
(OMB#: 0925-0740 Exp Date: 05/2019)**

---

**TITLE OF INFORMATION COLLECTION:**

**PURPOSE:**

**DESCRIPTION OF RESPONDENTS:**

**TYPE OF COLLECTION:** (Check one)

Abstract

Application

Registration Form

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.

Name:

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 |

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes  No

Amount:

Explanation for incentive: (include number of visits, etc.)

**ESTIMATED BURDEN HOURS and COSTS**

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
<b>Totals</b>				

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
<b>Totals</b>			

\*Cite source per bls.gov if applicable

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

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
<b>Contractor Cost</b>					
Travel					
Other Cost					

**The selection of 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?

**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

Survey form

Chart Abstraction

Other, Explain

2. Will interviewers, facilitators, or research coordinators be used? Yes  No

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