Request for Approval under the "Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)" (OMB#: 0925-0740, Expiration Date: 05/31/2019)

TITLE OF INFORMATION COLLECTION:

Specialized Programs of Research Excellence (SPORE) REVISED Contact Information Form

PURPOSE: This form will be used to update contact information for active Specialized Programs of Research Excellence (SPORE) grantees to inform them about upcoming meetings, conferences, and registration activities. Contact Information will be collected on the SPORE Director(s), the SPORE Director(s)' Assistant, and the SPORE Administrator. This was originally approved in July 2018, but it was determined that a revision needed to be made for more clarity. The program re-arranged a few items on the form (e.g. revising section names and combining the administrative assistant fields under the PI name).

DESCRIPTION OF RESPONDENTS:

Respondents are SPORE Directors of active SPORE grants (https://www.cancer.gov/about-nci/budget/fact-book/extramural-programs/spores).

TYPE OF COLLECTION: (Check one)

[] Abstract	`	[] Application
[] Registration Form		[X] Other: <u>Contact Information</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 <u>not</u> raise issues of concern to other federal agencies.

Tamara Walton; 240-276-5686.

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

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? [X] Yes [] No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [X] Yes [] No

Gifts or Payments:

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

Amount: _

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

ESTIMATED BURDEN HOURS and COSTS

Category of Respondent	No. of Respondent s	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals	300	1	10/60	50
Totals	300	300		50

The total burden is estimated to be 50 hours.

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals	50	\$45.64	\$2,282.00
Totals	50		\$2,282.00

* The mean hourly wage for the SPORE Director was calculated based upon Occupation Code for Medical Scientist (19-1040) in Bureau of Labor and Statistics (https://www.bls.gov/oes/current/oes_nat.htm).

FEDERAL COST: The estimated annual cost to the Federal government is \$10,441.50.

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Analyst	13/9	\$122,830	5%		\$6,141.50
Contractor Cost					\$4,300.00
Travel					\$0
Other Cost					\$0
Total					\$10,441.50

** https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/DCB.pdf

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?

[X] Yes [] No

Respondents are active P50 grantees in the Translational Research Program portfolio.

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
 - [] Survey form
 - [] Chart Abstraction
 - [] Other, Explain
- 2. Will interviewers, facilitators, or research coordinators be used? [] Yes [X] No

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

TRP Contact Information Form_8-13-2018