

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: 2019 Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) Young Investigators Travel Awards Form

PURPOSE: The National Institute of Neurological Disorders and Stroke (NINDS) and the National Institute of Allergy and Infectious Diseases (NIAID) will hold a workshop on April 3rd, 2019 for early career Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS) researchers. The workshop is a satellite event to the NIH "Accelerating Research on ME/CFS" conference on April 4-5, 2019. The overall goal of the workshop is to help build and support a network of early career ME/CFS researchers. To help accomplish this, NINDS and NIAID will provide travel support to some workshop attendees. Workshop attendees will be asked to submit information that will be used to help evaluate who is provided travel support.

DESCRIPTION OF RESPONDENTS: Respondents will include attendees of the April 3rd, 2019 workshop who wish to apply for travel support. Attendees will be early career ME/CFS researchers, including undergraduate students, post-bacs, graduate students, post-doc researchers, or early stage investigators. Submitting a specific aims page or a research abstract is optional, so respondents will fall into two categories; those who chose to submit a specific aims page/abstract and those who chose not to submit a specific aims page/abstract.

TYPE OF COLLECTION: (Check one)

Abstract
 Registration Form

Application
 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: Sophia Jeon, Ph.D. Health Science Policy Analyst, NINDS OSPP

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 |
|---|--------------------|---------------------------------|------------------------------|--------------------|
| Individual: early career ME/CFS researchers not submitting a research abstract/specific aims page | 20 | 1 | 20/60 | 7 |
| Individual: early career ME/CFS researchers submitting a research abstract/specific aims page | 20 | 1 | 45/60 | 15 |
| Totals | 40 | | | 22 |

| Category of Respondent | Total Burden Hours | Wage Rate* | Total Burden Cost |
|------------------------|--------------------|------------|-------------------|
| Individuals: | 22 | \$38.56 | \$848.32 |
| Totals | | | \$848.32 |

* Hourly wage rates for 19-1029 Biologic Scientist is \$38.56 (based on <https://www.bls.gov/oes/current/oes191029.htm>)

FEDERAL COST: The estimated annual cost to the Federal government is **\$2,636.11**

| Staff | Grade/Step | Salary | % of Effort | Fringe (if applicable) | Total Cost to Gov't |
|--------------------------------------|------------|-----------|-------------|------------------------|---------------------|
| Federal Oversight | | | | | |
| NINDS Division of Neuroscience Staff | GS 12/4 | \$89,703 | 1% | | \$897.03 |
| NINDS Program Director | GS 14/7 | \$137,508 | 1% | | \$1375.08 |
| Contractor Cost | | | | | |
| Web management team | | \$36,400 | 1% | | \$364 |
| Other Cost | | | | | |
| | | | | | |
| Total | | | | | \$2,636.11 |

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?

Respondents to the nomination form are undergraduate students, post-bacs, graduate students, post-doc researchers, or early stage investigators working in ME/CFS research. Information about the application will be distributed to individuals who hold NIH grants on ME/CFS. We will not sample the respondent population, but an estimated total of 75 researchers are expected as a potential universe. Out of this population, only those who wish to apply for travel funds to the April 3rd, 2019 workshop – about 40 researchers (half of the universe of potential respondents) – will email the requested information.

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