

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 3090-0297)
Req-6

TITLE OF INFORMATION COLLECTION: OSBU Seminar Evaluation Form

PURPOSE: The form will be used to gauge the effectiveness of our April 6, 2017 seminar and the results will be used to make improvements to future events.

DESCRIPTION OF RESPONDENTS:

Small business vendors who have been awarded GSA contracts

TYPE OF COLLECTION: (Check one)

- | | |
|---|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey via Email |
| <input type="checkbox"/> Usability Testing (<i>e.g.</i> , Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> 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.
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: Syretta Dyson **Email:** syretta.dyson@gsa.gov **Phone:** 301-379-9709

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 [x] No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [] Yes [x] No

If PII is collected, please provide a brief statement regarding why PII is necessary, how it will be stored and for how long, and how it will be destroyed once the collection is over.

Gifts or Payments:

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector Vendors awarded GSA contracts	1,000	4 minutes (or .06667 hours)	66.7 hours
Private Sector Vendor Attendees	1,000	4 minutes (or .06667 hours)	66.7 hours
Totals	2,000	4 minutes (or .06667 hours) per survey	hours 133

FEDERAL COST: \$104.

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 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)?
Yes, the respondents are small business vendors that have a GSA Schedule contract. Information for each vendor has been pulled from FSS-19.

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 (Email)

We will conduct survey by sending an email with the survey link

Other, Explain We will use the survey tool Qualtrics

2. Will interviewers or facilitators be used? [] Yes [x] No

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