

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 1652-0058)**

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**TITLE OF INFORMATION COLLECTION:** *Participants Feedback Survey for Transportation Security Administration’s Innovation Task Force Industry Engagement Efforts.*

**PURPOSE:** *The Transportation Security Administration (TSA) will distribute this survey in order to receive feedback from participants regarding their experience with the Innovation Task Force (ITF) in order to improve communication and solicitation processes. The Innovation Task Force is a new division within the TSA Office of Requirements and Capabilities Analysis that works to identify and demonstrate emerging process and technology solutions for improved security in live airport demonstrations.*

**DESCRIPTION OF RESPONDENTS:** *The respondents are external stakeholders such as solution providers/vendors, airlines, and airports.*

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

- |  |  |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., 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:** *J. Matt Gilkeson (TSA Innovation Task Force)*

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, will any information that is collected be included in records that are subject to the Privacy Act of 1974?  Yes  No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published?  Yes  No

**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 (mins.)	Burden (hrs.)
ITF Industry Exchange Participants	500	10	83.33
<b>Totals</b>	<b>500</b>	<b>10</b>	<b>83.33</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$5,748.

**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?

[X] 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?

*ITF's potential group of survey respondents would consist of individuals attending aviation or security focused conferences as well as airline executives and airport executives who have previously worked with ITF. Survey participants will be a sample of the people who partake in ITF's industry exchange efforts. For example, ITF would email a survey out to all of the individuals who signed up to learn more about ITF after visiting an ITF booth at a conference or attending an ITF industry day.*

### **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.**