

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

**TITLE OF INFORMATION COLLECTION:** *TSA Pre✓<sup>®</sup> Application Program Focus Groups.*

**PURPOSE:** To discuss with current and potential TSA Pre✓<sup>®</sup> Application Program enrollees the relative benefits of and barriers to enrollment in the TSA Pre✓<sup>®</sup> Application Program. This information will be used to better market and position the TSA Pre✓<sup>®</sup> Application Program as well as evaluate potential enrollment process improvements.

**DESCRIPTION OF RESPONDENTS:** Respondents will include individuals who have enrolled in the TSA Pre✓<sup>®</sup> Application Program as well as individuals who have not enrolled in the TSA Pre✓<sup>®</sup> Application Program but are open to enrolling.

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

- |  |   |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form            | <input type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (such as Website or Software) | <input type="checkbox"/> Small Discussion Group       |
| <input checked="" 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: Anne B. Walbridge 

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
3. If Applicable, has a System or Records Notice been published?  Yes  No

**Gifts or Payments:**

Is an incentive (such as money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

**\$75 per person. An incentive will greatly increase the likelihood of participants attending the real time research group on time and providing their undivided attention. It is standard and accepted market research practice to compensate respondents.**

**BURDEN HOURS**

Category of Respondent	No. of Respondents	Participation Time	Burden
Individuals	35	1 hour	35 hours
<b>Totals</b>	35		35 hours

**FEDERAL COST:** The estimated annual cost to the Federal government is: **\$48,991.73**

TSA Position and Grade	Average Hourly Loaded Rate of Pay	Estimated Number of Hours	Estimated Number of Annual Reviews	Estimated Annual Cost to the Federal Government
Program Manager/ K-Band	\$64.21	2	1	\$128.42
Contractor (Firm Fixed Price)	N/A	N/A	1	\$48,863.31
	Total Estimated Annual Cost to the Federal Government			<b>\$48,991.73</b>

**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**

- 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?

*For purposes of this collection, the universe of potential respondents will be defined as anyone potentially eligible for TSA Pre✓<sup>®</sup>. The sampling selection will be done via a third party research firm.*

**Administration of the Instrument**

- How will you collect the information? (Check all that apply)
  - Web-based or other forms of Social Media
  - Telephone
  - In-person
  - Mail

[ ] Other, Explain

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

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

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