

# DOCUMENTATION FOR THE GENERIC CLEARANCE OF CUSTOMER SERVICE SATISFACTION COLLECTIONS

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**TITLE OF INFORMATION COLLECTION:**

Presidential Symposium Leadership Survey

**SURVEY**       **FOCUS GROUP**       **SOFTWARE USABILITY TESTING**

**DESCRIPTION OF THIS SPECIFIC COLLECTION**

Specify all relevant information, including

1. Intended purpose: The purpose of this survey is to gather information to assess the effectiveness and quality of the recently held FSA’s SE/MSURSD Presidential Leadership Symposium. The survey not only measures the quality of the outreach but also the relevance and the desire for future symposiums.
2. need for the collection: To gain customer feedback
3. planned use of the data: Specific feedback will help us in developing content for future symposiums and interactions with university administrators
4. Date and location(s): The most recent symposium was conducted in Puerto Rico February 2019. Future dates and locations to be determined. This survey will be used to collect feedback from the February symposium.
5. collection procedures: Attendees/participants will be sent a link to the electronic survey using the email address they provided
6. number of focus groups, surveys, usability testing sessions: one survey per attendee
7. Description of respondents/participants. The participants will consist of University Presidents/Chancellors or their designated representative

*State whether the data collection will be completed one time will be collected on an annual basis, or other. **One Time***

*Attach a copy of the proposed collection instrument, e.g., survey questions, focus group script, usability testing plan. If a focus group also includes a survey, include both.*

**AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE:** N/A

**BURDEN HOUR COMPUTATION** (Number of responses (X) estimated response or participation time in minutes (/60) = annual burden hours):

Category of Respondent	No. of Respondents	Participation Time	Burden
University Presidents/Chancellors	100	5 minutes	8 hours
<b>Totals</b>	100	5 minutes	8 hours

**BURDEN COST COMPUTATION** (this is only required when a stipend is being offered)

<b>Category of Respondent</b>	<b>No. of Respondents</b>	<b>Hourly Rate</b>	<b>Response Time</b>	<b>Total</b>
N/A				
<b>Totals</b>				

**STATISTICAL INFORMATION**

*If statistical methods are to be used, fully describe the methodology, sample selection, expected response rates, and any other concepts needed to provide a full understanding of those methods.*

**REQUESTED APPROVAL DATE:** 4/17/2019

**NAME OF CONTACT PERSON:** Freda Donald

**TELEPHONE NUMBER:** 202 377-3600

**MAILING LOCATION:** UCP Rm 31J1, 830 First Street NE, Washington, DC 20202

**ED DEPARTMENT, OFFICE:** Federal Student Aid, School Experience, Minority-Serving and Under-Resourced Schools Division