

**REQUEST FOR APPROVAL UNDER THE “GENERIC CLEARANCE  
FOR QUALITATIVE CONSUMER EDUCATION, ENGAGEMENT, AND  
EXPERIENCE INFORMATION COLLECTIONS”  
(OMB Control Number: 3170-0036)**

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**1. TITLE OF INFORMATION COLLECTION:**

*Your Money, Your Goals* Booklet Research

**2. PURPOSE:**

To evaluate the effectiveness of prototypes of consumer education materials based on *Your Money, Your Goals* content. This information will be utilized to refine and finalize the prototypes.

**3. DESCRIPTION OF RESPONDENTS:**

Social and human services staff in public and non-profit organizations that interact with low-income consumers.

**4. TYPE OF COLLECTION (ADMINISTRATION OF THE INSTRUMENT):**

**a. How will you collect the information? (Check all that apply)**

- |   |                                      |
|---|--------------------------------------|
| <input type="checkbox"/> Web-based or other forms of Social Media | <input type="checkbox"/> Telephone   |
| <input checked="" type="checkbox"/> In-person                     | <input type="checkbox"/> Mail        |
| <input checked="" type="checkbox"/> Small Discussion Group        | <input type="checkbox"/> Focus Group |
| <input type="checkbox"/> Other, Explain _____                     |                                      |

**b. Will interviewers or facilitators be used?**

Yes  No  Not Applicable

**5. FOCUS GROUP OR SURVEY:**

**If you plan to conduct a focus group or survey, please provide answers to the following questions:**

**a. 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  Not Applicable

**b. If the answer is yes, please provide a description below. 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?**

Each year, the Bureau provides training and technical assistance to a cohort of public, non-profit, and private organizations that wish to implement use of *Your Money, Your Goals*. Sites for testing will be identified based on organizations' levels of engagement with *Your Money,*

*Your Goals*, including implementation of use of a companion booklet of tools, *Behind on Bills*, and availability in the timeframe designated for the feedback sessions. Up to two sites may be contacted per cycle of testing to ensure that one site is available for participation. The organization's local Site Coordinator will, independent of CFPB, identify respondents for this collection based on their level of contact with program clients as well as their level of experience with the topics of the prototype materials. The local Site Coordinator will contact respondents about the dates and times of their meetings with CFPB staff.

## 6. INFORMATION COLLECTION PROCEDURES

There will be a total of six cycles of testing, with each cycle engaging a unique group of up to ten respondents. Each cycle consists of three separate phases (a group session and two separate interviews) in which the same respondents will be invited to provide feedback.

In the first phase of each cycle of testing, respondents will be provided a copy of the prototype booklet. They will then engage in approximately four hours of individual and group activities that include: individual completion of tools; group discussions of tool content and structure; role plays that allow them to use the tools as they would in a client meeting; group discussion of potential use of the tools with clients.

Following the group activity, each individual will be invited to participate in an individual one-hour interview.

These respondents will keep their copy of the prototype booklet for four to six weeks and will voluntarily share its content and tools with the people they serve.

Each cycle concludes with one-hour individual, in-person interviews regarding their experience in using the tools, the barriers to usage they encountered, and how clients responded to the tools.

## 7. PERSONALLY IDENTIFIABLE INFORMATION:

- a. **Is personally identifiable information (PII) collected?**  Yes  No
- b. **If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?**  Yes  No  Not Applicable
- c. **If Applicable, has a System or Records Notice (SORN) been published?**  
 Yes  No  Not Applicable  
If yes, cite the SORN. Title: \_\_\_\_\_  
\_\_\_\_\_ FR \_\_\_\_\_.
- d. **If applicable, what is the link to the Privacy Impact Assessment (PIA)?**

A PIA is not required since there is no PII being collected.

## 8. INCENTIVES:

- a. Is an incentive provided to participants? [ ] Yes [X] No
- b. If Yes, provide the amount or value of the incentive? \$ N/A.
- c. If Yes, provide a statement justifying the use and amount of the incentive.  
Not applicable

**9. ASSURANCES OF CONFIDENTIALITY:**

- 1. Will a pledge of confidentiality be made to respondents? [ ] Yes [X] No
- 2. If Yes, please cite the statute, regulation, or contractual terms supporting the pledge.  
Not applicable

**10. JUSTIFICATION OF SENSITIVE QUESTIONS (if applicable):**

Not applicable.

**11. BURDEN HOURS:**

Category of Respondent	Number of Respondents	Frequency	Number of Responses	Response Time (hours)	Burden (hours)
Social and human services staff (Group session)	60	1x	60	4.0	240
Social and human services staff (Individual Interviews)	60	2x	120	1.0	120
<b>Totals</b>	<b>120*</b>	////////////////	180	////////////////	<b>360</b>

\*Note: Respondents in line two are the same individuals as in line one.

**12. FEDERAL COST:** The estimated annual cost to the Federal government is \$12,000.

**13. CERTIFICATION:**

**CERTIFICATION PURSUANT TO 5 CFR 1320.9, AND THE RELATED PROVISIONS OF 5 CFR 1320.8(b)(3) :**

By submitting this document, the Bureau certifies the following to be true:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It uses plain, coherent, and unambiguous terminology that is understandable to respondents;
- (d) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (e) It indicates the retention period for recordkeeping requirements;
- (f) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
  - (i) Why the information is being collected;
  - (ii) Use of information;
  - (iii) Burden estimate;
  - (iv) Nature of response (voluntary);
  - (v) Nature and extent of confidentiality; and
  - (vi) Need to display currently valid OMB control number;
- (g) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected;
- (h) It uses effective and efficient statistical survey methodology; and
- (i) It makes appropriate use of information technology.

**CERTIFICATION FOR INFORMATION COLLECTIONS SUBMITTED UNDER A GENERIC INFORMATION COLLECTION PLAN**

By submitting this document, the Bureau certifies the following to be true:

- The collection is voluntary.
- The collection is low-burden for respondents.
- The collection is non-controversial and does not raise issues of concern to other federal agencies.
- Information gathered will not be used for the purpose of substantially informing influential policy decisions.
- The collection is not statistically significant; the results are not intended to be generalizable beyond the survey population.
- The results will not be used to measure regulatory compliance or for program evaluation.