Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 2105-0573)

TITLE OF INFORMATION COLLECTION: DOT Acquisition 360 Survey: Pre-Award & Debriefing Satisfaction Survey

PURPOSE: U.S. Department of Transportation will conduct a survey on "Acquisition 360 – Improving the Acquisition Process through Timely Feedback from External and Internal Stakeholders" as explained in the White House Memorandum for Chief Acquisition Officers / Senior Procurement issued on March 18, 2015.

DESCRIPTION OF RESPONDENTS:

TVDE OF COLLECTION: (Chack one)

All vendors who submitted proposals, whether they were in the competitive range or not, shall be asked to rate various aspects of the acquisition process, such as the strength of the requirements development process, the clarity of the solicitation, and the efficacy of the agency in executing awards and debriefing offerors. The post-award survey shall be voluntary and confidential for the vendors. Similarly, the survey does not convey any protections, rights, or grounds for protest, but creates a way for vendors to give the government constructive feedback about the pre-award and debriefing process on a specific acquisition.

| TITE OF COLLECTION. (Check one) | | |
|---|--|--|
| [] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software [] Focus Group | [X] Customer Satisfaction Survey[] Small Discussion Group[] 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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The results are <u>not</u> intended to be disseminated to the public.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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: Lenita Ahmadi

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 | e (SORN) been p | oublisned? [] Ye | es [] No |
|---|-----------------------|-----------------------|-----------|
| Gifts or Payments: Is an incentive (e.g., money or reimbursement of exper participants? [] Yes [X] No | nses, token of ap | preciation) provic | led to |
| BURDEN HOURS | | | |
| Category of Respondent | No. of Respondents | Participation Time | Burder |
| Contracting Community | 570 | N/A | 143 |
| Program Office | N/A | N/A | N/A |
| Contracting Office | N/A | N/A | N/A |
| Totals | 570 | 15 Minutes | 143 |
| If you are conducting a focus group, survey, or plant provide answers to the following questions: The selection of your targeted respondents 1. Do you have a customer list or something similar the respondents and do you have a sampling plan for something plan for something plan for something similar the respondents. | hat defines the u | niverse of potenti | al |
| If the answer is yes, please provide a description of both the answer is no, please provide a description of how y respondents and how you will select them? The contracts and that will be the targeted audience. | ou plan to identi | fy your potential | group of |
| Administration of the Instrument 1. How will you collect the information? (Check all the second of Social Media [1] Telephone [1] In-person [1] Mail [1] Other, Explain | hat apply) | | |
| 2. Will interviewers or facilitators be used? [] Yes [| X] No | | |
| Please make sure that all instruments, instructions, request. | and scripts are | submitted with | the |
| Instructions for completing Request for Clearance for the Collection of Ro | | | eric |

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected per row.

No. of Respondents: Provide an estimate of the Number of Respondents.

Participation Time: Provide an estimate of the amount of time (in minutes) required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours: Multiply the Number of Respondents and the Participation Time then divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

Submit all instruments, instructions, and scripts are submitted with the request.