

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0524-0051)**

---

**TITLE OF INFORMATION COLLECTION:**

NIFA Listens: Investing in Science to Transform Lives

**PURPOSE:**

The purpose of this data collection effort is to gather stakeholder feedback to help NIFA in developing new programs and eliminate redundant or low-performing programs while crafting budget requests and contributing to the strategic planning process. The stakeholder input form is the primary data collection mechanism to 1) obtain public comment from about the following questions, What is your top priority in food and agricultural research, extension or education that NIFA should address? and What are the most promising science opportunities for advancement of food and agricultural sciences? and 2) to allow stakeholders to register for the in-person component of this stakeholder listening effort. This data collection method is just one part of the stakeholder listening effort. In-person listening sessions and comments via a Federal Register Notice will also be collected.

**DESCRIPTION OF RESPONDENTS:**

NIFA hopes to engage with stakeholders and partners with a vested interest in the research, extension, and education opportunities provided by NIFA to support the long-term health and viability of U.S. Agriculture. We envision the customers and respondents as stakeholders representing industry, national organizations and institutions, local producers, all scales of government and other groups interested in issues facilitating opportunities in the long-term for sustainable agricultural production

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

- |  |  |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input 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 checked="" type="checkbox"/> Other: <u>Customer Feedback Form</u> |

**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: \_\_\_\_\_

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 (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	Burden
Individuals or Households	100	15 minutes	25 hrs
Private Sector	1000	15 minutes	250 hrs
State, Local, Tribal Government	500	15 minutes	125 hrs
Federal Government	250	15 minutes	62.5 hrs
<b>Totals</b>	<b>1850</b>		<b>437.5</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$1363 or 40 hours for a GS 11

**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?  
 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?

This effort will be made public on the NIFA website as well as via publication of a Federal Register Notice. A targeted stakeholder list compiled by NIFA staff will also be contacted about this feedback opportunity. Access to the form will be through the event website. It will not be sent directly to any respondents.

**Administration of the Instrument**

- 1. 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? [ ] Yes [X] No

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

**Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”**

---

**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.

**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.

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

**Participation Time:** Provide an estimate of the amount of time 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 responses and the participation time and 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.

Access to the stakeholder input form will be through the event website. It will not be sent directly to any respondents.

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