

**Request for Approval under the “DOL Departmental Generic Clearance for
the Collection of Routine Customer Feedback”
(OMB Control Number: 1225-0088)**

TITLE OF INFORMATION COLLECTION:

**User Experience feedback of Solver Minimum Viable Products (MVP) for the VETS
Employment Challenge**

PURPOSE:

The Vets Employment Challenge <https://www.challenge.gov/challenge/vets-match/> is a competition aimed at developing a new tool to help transitioning service members of the military in their job searches. The Department of Labor’s Veterans’ Employment Training Service (VETS), with in-kind support through participation in testing and review from the Departments of Defense (DOD) and Veterans Affairs (VA), established the competition to challenge developers to create a better tool to match transitioning service members and employers. The competition will be conducted through five phases, enabling developers to further engage users in the design process and gather feedback on working prototypes.

Phase II closed February 28, 2020 and the top five Solvers moved into Phase III beginning March 9, 2020. The solvers selected to move to Phase III are invited to participate in a User testing session to test their Minimum Viable Products (MVP) the week of March 30-April 3, 2020 in a virtual user testing session. Solvers will submit MVPs (a clickable link to a working example of their website or application) to receive feedback from three user groups (Professionals working in the Veteran Employment Space, Veterans and Transitioning Service Members.)

All user volunteers will receive an email that will include instructions on how to complete the user testing process with the Solvers PDF documents attached. Using a computer or other electronic device, the users will review one MVP and complete the online survey, then repeat this process for all five MVPs. A unique survey link will be used for each of the Solver MVPs, but the surveys are all identical. This review process will take ten minutes per MVP for a total of fifty minutes per user. To ensure maximum response is received, follow-up emails will be sent to users as a reminder of the survey deadline.

The feedback submitted by the users through the survey will be compiled and delivered to the respective solvers via email. Each solver will only receive the feedback received on their MVP submissions, and the feedback will not be shared, distributed, published or posted otherwise. The solvers will utilize the user feedback to make changes to the MVPs for judging at the end of Phase III.

DESCRIPTION OF RESPONDENTS:

Respondents are volunteers comprised of 75 Individuals (Professionals working in the Veteran Employment Space, Veterans and Transitioning Service Members.)

TYPE OF COLLECTION: (Check one)

- | | |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input type="checkbox"/> Customer Satisfaction Survey |
| <input checked="" type="checkbox"/> Usability Testing (e.g., Website or Software | <input type="checkbox"/> Small Discussion Group |
| <input 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.

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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, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [] Yes [X] No
- 3. If Applicable, has a System or Records Notice been published? [] Yes [X] No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Individual	75	50 minutes	3,750 minutes
Totals			62.50 hours

FEDERAL COST: The estimated annual cost to the Federal government is: 10 staff hours

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 [X] 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?

1. DOLVETS will provide contact information for 15 professionals who work in the Veteran employment space, who volunteer to receive the survey. DOLVETS contacted current employer partners asking for volunteers to participate in the User Experience Survey. Interested professionals are contacting DOLVETS to confirm participation.
2. DOD will provide contact information of 30 transitioning service members who volunteered to complete the user testing. To provide the
3. VA is coordinating with Veteran Organization Liaisons from Veteran Service Organizations to provide contact information of 30 Veterans who volunteered to complete the user testing.

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 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.

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