

**Request for Approval under the
“Generic Clearance for the Collection of Routine Customer Feedback”
(OMB#: 0925-0642, Expiration Date: 05/31/2020)**

TITLE OF INFORMATION COLLECTION: Scientific Library support survey at the National Cancer Institute at Frederick.

PURPOSE:

Scientific Library support for the National Cancer Institute (NCI) at Frederick is provided by the prime contractor for the Frederick National Laboratory for Cancer Research through a resident subcontractor. In order to ensure that Scientific Library support for the NCI at Frederick is aligned with the current and future mission requirements of the NCI, users of the Scientific Library will be queried about their current use of services as well as their anticipated support needs in the future. Soliciting secure feedback via an online mechanism is the most efficient way of determining the diverse support needs for our local user community.

DESCRIPTION OF RESPONDENTS:

Respondents to this survey are staff members at the NCI at Frederick, who use scientific library services. This survey should be completed internally by Government employees, fellows, interns, volunteers, as well as contractor (Leidos Biomedical Research, Inc.) and resident subcontractor employees. This survey should only take approximately 15 minutes.

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: Customer Input/Use Survey |

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: Walter G. Hubert, PhD, NCI Scientific Program Director _____

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 [] 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

ESTIMATED BURDEN HOURS and COSTS

| Category of Respondent | No. of Respondents | No. of Responses per Respondent | Time per Response (in hours) | Total Burden Hours |
|------------------------|--------------------|---------------------------------|------------------------------|--------------------|
| Individuals | 3000 | 1 | 15/60 | 750 |
| Totals | 3000 | 3000 | | 750 |

| Category of Respondent | Total Burden Hours | Hourly Wage Rate* | Total Burden Cost |
|------------------------|--------------------|-------------------|-------------------|
| Individuals | 750 | \$45.64 | \$34,230 |
| Total | | | \$34,230 |

*Source of the mean Hourly Wage Rate is provided by the Bureau of Labor Statistics, Occupation title “Medical Scientists” 19-1040, https://www.bls.gov/oes/2017/May/oes_nat.htm#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is \$ 2,750 .

| Staff | Grade/Step | Salary** | % of Effort | Fringe (if applicable) | Total Cost to Gov't |
|-----------------------------|------------|-----------|-------------|------------------------|---------------------|
| Federal Oversight | | | | | |
| Scientific Program Director | 14/7 | \$137,508 | 2.0% | | \$2,750 |
| Contractor Cost | | | | | |
| Travel | | | | | 0 |
| Other Cost | | | | | 0 |
| Total | | | | | \$2,750 |

**The salary in the table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/18Tables/html/DCB.aspx>

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

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

Prospective respondents to the survey will be contacted by email via a listserv notice to all Federal and contracted staff at the NCI at Frederick.

Administration of the Instrument

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

Web-based or other forms of Social Media

Telephone

In-person

Mail

Other, Explain

Will interviewers or facilitators be used? Yes No

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