

INSTRUCTIONS:			TITLE OF INFORMATION COLLECTION DOCUMENT					OMB NO.		
			National Veterinary Accreditation Program Application Form					0579-0297		
								DATE PREPARED		
								June 1, 2017		
IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT		ANNUAL BURDEN								
		REPORTS						RECORDS		
SECTION OF REGS	DESCRIPTION	FORM NO's (if none, so state)	NO. OF RESPONDENTS	NO. OF RESPONSES PER RESPONDENT	TOTAL ANNUAL RESPONSES	HOURS PER RESPONSE	TOTAL HOURS	NO. OF RECORD- KEEPERS	ANNUAL HOURS PER RECORD- KEEPER	RECORD- KEEPING HOURS
(A)	(B)	(C)	(D)	(E)	(Col. D x E) (F)	(G)	(Col. F x G) (H)	(I)	(J)	(Col. I x J) (K)
9 CFR 161	National Veterinary Accreditation Program Application Form (Business)	VS 1-36A	23,800	1	23,800	0.500	11,900			
9 CFR 161.6	Request for Appeal (Business)		1	1	1	1.000	1			
SUBTOTAL					23,801		11,901	0		0
TOTAL OF ALL PAGES					23,801		11,901	0		0
TOTAL					23,801		11,901			
COLUMNS F + I = OMB 831, 13b										
COLUMNS H + K = OMB 831, 13c										