

## **Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 1880-0542)**

**TITLE OF INFORMATION COLLECTION:** State Support Network Interview Protocol

**PURPOSE:** This interview protocol is intended to be used for either one-on-one or small-group interviews conducted under contracts, grants, or initiatives supported by the Office of Elementary and Secondary Education at the U.S. Department of Education (ED). It is designed to elicit information about the quality, relevance, and effectiveness of technical assistance (TA) services. Results from interviews conducted using this protocol will be used by project teams to facilitate continuous improvement and inform future programming decisions. Additionally, this protocol will be used by project teams and ED staff for evaluation purposes.

This interview protocol can be used as part of a broader evaluation plan sponsored by ED’s Office of Elementary and Secondary Education. Specifically, this TA protocol can be used in conjunction with TA participant surveys, direct observation of TA events to assess quality of materials and delivery, web-usage logs for on-line resources, and other forms of data collection. OMB clearance for these other data collection components will be sought as applicable.

### **DESCRIPTION OF RESPONDENTS:**

Those interviewed will be individuals, representatives of State and Local educational agencies and other organizations supporting the operation and improvement of education in the United States, who have participated in one or more TA events conducted as a part of a contract or initiative supported by ED. Participants in individualized TA, peer-to-peer exchanges, or Communities of Practice facilitated by the State Support Network, sponsored by ED’s Office of State Support, would be examples of such respondents. All respondents will be adults, responding to the survey as a part of their professional roles.

### **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>One-on-One Interview</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: Christopher Tate, Office of State Support

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	150	30 minutes	75 Hours
<b>Totals</b>	<b>150</b>	30 minutes	<b>75 Hours</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$43,500.

**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? ED will know the complete list of participants in TA interviews based TA event registration with registrants being comprised of grantees and others supporting the implementation of ED administered grants. A cross-section of participants and providers will be identified to participate in this voluntary interview (thus, creating a sample of responses).

**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.**