OMB Control No.: 3095-0070 Expiration date: 10-31-2017

Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 3095-0070)

TITLE OF INFORMATION COLLECTION: OGIS Agency FOIA Program Compliance **Review Survey**

PURPOSE: The Office of Government Information Services (OGIS) reviews agency Freedom of Information Act (FOIA) policies, procedures and compliance, and identifies procedures and methods for improving compliance. As part of that statutory role, we assess FOIA compliance at individual agencies by visiting agency FOIA programs and reviewing material, agency request files, internal procedures for processing requests, regulations, annual reports to the U.S. Department of Justice, and litigation, among other sources. In line with the National Archives and Records Administration's strategic goal to "Make Access Happen," this survey is a tool to improve OGIS's understanding of the state of an agency's FOIA program, and identify areas for improvement so that FOIA leaders can address issues, and develop and launch strategies to strengthen and improve agency FOIA programs.

DESCRIPTION OF RESPONDENTS: OGIS will send a link to the online poll to the head of the agency's FOIA program who will then distribute the poll to his or her FOIA staff. This could include the general public as well as staff members from federal agencies.

TYPE OF COLLECTION: (Check one)

Customer Comment Card/Complaint Fo				
Usability Testing (e.g., Website or Soft	ware Small Discussion Group			
Focus Group	Other:			
CERTIFICATION:				
I certify the following to be true:				
1. The collection is voluntary.				
2. The collection is low-burden for respon	ndents and low-cost for the Federal Government.			
3. The collection is non-controversial and does <u>not</u> raise issues of concern to other federal				
agencies.				
4. The results are <u>not</u> intended to be disse	minated to the public.			
5. Information gathered will not be used f	for the purpose of <u>substantially</u> informing <u>influential</u>			
policy decisions.				
6. The collection is targeted to the solicita	ation of opinions from respondents who have			
experience with the program or may ha	eve experience with the program in the future.			
Name: <u>Kirsten Mitchell</u>				
m	.1 6.11			
To assist review, please provide answers to	the following question:			
Personally Identifiable Information:				
1. Is personally identifiable information (PII) collected? Xes No			
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	Required by NARA			

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 2. If Yes, will any information that is collected be incorprivacy Act of 1974? Yes No 3. If Yes, has an up-to-date System of Records Notice 		<u> </u>	the
Gifts or Payments: Is an incentive (e.g., money or reimbursement of exper participants? ☐ Yes ☒ No	ises, token of ap	preciation) provid	led to
BURDEN HOURS			
Category of Respondent	No. of Respondents	Participation Time	Burden
Individuals or Household	100	10 minutes	17
Federal Government			
Totals			
If you are conducting a focus group, survey, or plan provide answers to the following questions: The selection of your targeted respondents 1. Do you have a customer list or something similar the respondents and do you have a sampling plan for something plan for something similar the respondents and do you have a sampling plan for something similar the respondents and do you have a sampling plan for something similar the respondents and do you have a description of both the answer is no, please provide a description of how you respondents and how you will select them? All OGIS customers will have the opportunity to particular.	nat defines the unelecting from this had below (or attacou plan to identificate in the assessing the second plan to the assessing the second plan to the assessing the definition of the assessing the asset as a superiority as a superiority as a superiority as a superiority as a supe	niverse of potentics universe? Yes No The sampling p fy your potential ssment. The response	al lan)? If group of ondents
Administration of the Instrument 1. How will you collect the information? (Check all the Web-based or other forms of Social Media Telephone In-person Mail Other, Explain 2. Will interviewers or facilitators be used? Yes	nat apply)	s provided service	to.
Please make sure that all instruments, instructions,	and scripts are	submitted with	the

request.

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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. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

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 per row.

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.

Submit all instruments, instructions, and scripts with the request.