

## DEPARTMENT OF HEALTH & HUMAN SERVICES

National Institutes of Health National Cancer Institute Bethesda, Maryland 20892

Date:

To: Office of Management and Budget (OMB)

Through: DHHS Report Clearance Officer

Seleda Perryman, NIH Project Clearance Officer, OPERA Jennifer Guimond, NICHD Project Clearance Liaison

From:

Subject: **Generic Sub-Study, Title of Sub-study** 

(OMB No. 0925-0701)

Abstract and/or background information on the study/project.

## **Circumstances Making the Collection of Information Necessary**

Describe what make the information collection necessary

## Purpose and Use of the Information Collection

Describe the purpose of the information collection, including information on the respondent group; use of an incentive; whether the collection is voluntary, mandatory, or required for benefits; if personally identifiable information (PII) will be collected; and how the information will be securely stored.

## **Estimate of Burden Hours and Costs**

Provide the category of respondent (e.g., Individual-Household, Private Sector, or State/Local/Tribal/Federal governments); number of respondents for this collection, time (e.g., x/60), and response burden.

Category of Respondent	No. of	Participation	Response
	Respondents	Time	Burden
Totals			