## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 3137-0081)

**TITLE OF INFORMATION COLLECTION:** Grants to States All States Conference Evaluation

**PURPOSE:**

The annual Grants to States All States Conference attendees include the Library Services and Technology Act (LSTA) Coordinators from each of the 50 states, the District of Columbia, and participating outlying territories. The LSTA coordinators are one of IMLS’ key customers, playing a central role in administering the LSTA funds allocated to each state, including coordinating grant reporting. The annual All States Conference is held in order to (1) Train LSTA coordinators about reporting requirements associated with allotments; (2) Provide a forum within which coordinators can share best practices with each other; and (3) IMLS program officers and staff can share results from the State Project Report as a way to continuously improve the information gathered via the annual reporting about projects funded by IMLS.

IMLS seeks to gather feedback from the participants about this meeting.

**DESCRIPTION OF RESPONDENTS**:

Conference attendees will be asked to respond to the survey (Attachment A), which will be provided via a Survey Monkey link sent after the conference. Previously the face-to-face conference had attendance limits. However, under the current circumstances, a virtual meeting will be held using Adobe Connect, which permits a maximum of 500 participants. With time on the agenda to discuss COVID-19 responses, including the IMLS Grants to States disbursements of some of the IMLS-allocated CARES Act funds, the usual attendees (LSTA Coordinators) will be joined by State Library Chiefs, State Data Coordinators (SDCs) and others who are likely to attend at least a portion of the meeting. We expect response rates to be related to the level of participation, with those attending the full conference (i.e., LSTA coordinators) more likely than others to complete an evaluation.

**TYPE OF COLLECTION:** (Check one)

[ ] Customer Comment Card/Complaint Form [X] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] 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 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:\_\_\_Lisa M. Frehill\_\_\_\_\_\_\_\_\_\_\_\_

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, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No *Not Applicable*
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [ ] Yes [ ] No *Not Applicable*

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [X] No

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **Participation Time** | **Burden** |
| Conference attendees (non-IMLS staff) | 120 | 5 min/resp. | 10 hr |

**FEDERAL COST:** The estimated annual cost to the Federal government is $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? [**X**] 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?

A sample will not be drawn. The customer list is the list of attendees at the IMLS Grants to States All States Conference. Each attendee will be given a hard-copy survey and asked to complete it before they leave the conference.

**Administration of the Instrument**

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

[**X**] Web-based or other forms of Social Media

[ ] Telephone

[] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [**X**] No

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

## 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 (in minutes) 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 Respondents and the Participation Time then 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 are submitted with the request.**