## PAPERWORK REDUCTION ACT

## **CHANGE WORKSHEET**

Agency/Subagency		OMB Control Number
Department of Education		1820-0826
Enter only items that change  Current Record  New Record		
Agency form number(s)	NA	NA
Annual reporting and record keeping hour burden		
Number of respondents	NA	NA
Total annual responses	NA NA	NA .
Percent of these responses collected electronically	NA	NA NA
Total annual hours	NA	NA
Difference		NA
Explanation of difference		
Program Change		NA
Adjustment		NA
Annual reporting and record keeping		
cost burden (in thousands of dollars)	ALA	NA
Total annualized capital/startup costs	NA	NA
Total annual costs (O&M)	NA NA	NA
Total annualized cost requested	NA	NA
Difference		NA NA
×		
Explanation of difference		
Program Change		NA NA
Adjustment	THE REPORT OF THE PARTY OF THE	NA
Other change**		
We made minor language changes for clarification purposes and deleted two columns that were requesting duplicative information from a question we already ask in another section.		
Signature of Senior Officer or designee:	Date: 12/6/17	For OIRA Use

<sup>\*\*</sup>This form cannot be used to extend an expiration date