# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 1615-0121)

### TITLE OF INFORMATION COLLECTION: USCIS Contact Center Survey

**PURPOSE:** Barbaricum, a professional research firm, conducts monthly telephonic surveys on behalf of U.S. Citizenship and Immigration Services (USCIS) External Affairs Directorate (EXA), Office of Citizenship and Applicant Information Services (CAIS), Public Service Division (PSD). These surveys are conducted to provide stakeholder service feedback on the USCIS Contact Center experience. Every month, 600 telephone interviews are completed with respondents who have previously called the USCIS Contact Center 800-Line. Stakeholder feedback is important to EXA-CAIS-PSD because it helps provide us with insight on how we can improve the customer experience and operations at our call center.

**DESCRIPTION OF RESPONDENTS**: The respondents who are surveyed by our contract vendor Barbaricum are stakeholders who call the USCIS Contact Center 1-800 number. Barbaricum surveys 600 stakeholders per month who call our 1-800 number with immigration inquiries. Information and comments from the survey will be kept private to the extent permitted by law. Respondents participating in this survey will not be asked sensitive personal case specific information.

[ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software [] Focus Group	[ X] Customer Satisfaction Survey [ ] Small Discussion Group [ ] Other:			
CERTIFICATION:				
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 <u>not</u> raise issues of concern to other federal				
agencies.				
4. The results are <u>not</u> intended to be disseminated to the public.				
5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u>				
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:Jessica Membreno				

#### **Personally Identifiable Information:**

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

1. Is personally identifiable information (PII) collected? [ ] Yes [x ] No

To assist review, please provide answers to the following question:

a. The collection is covered by DHS/ALL/PIA-006 Department of Homeland Security Contact Lists

<ol> <li>If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [ X ] No</li> <li>If Applicable, has a System or Records Notice been published? [ X ] Yes [ ] No         <ul> <li>a. The collection is covered by DHS/ALL-002 Department of Homeland Security (DHS) Mailing and Other Lists System, November 25, 2008, 73 FR 71659</li> </ul> </li> </ol>				
<b>Gifts or Payments:</b> Is an incentive (e.g., money or reimbursement of experparticipants? [ ] Yes [X ] No	nses, token of ap	preciation) provid	led to	
BURDEN HOURS				
Category of Respondent	No. of Respondents	Participation Time	Burden	
Customers (individuals)	7,200	0.2 hour (12 mins)	1,440	
Totals	7,200	0.2 hour	1,440	
<ul> <li>FEDERAL COST: The estimated annual cost to the Federal government is \$540,633.24.</li> <li>If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:</li> <li>The selection of your targeted respondents</li> <li>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</li> </ul>				
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?				
When our stakeholder calls the 1-800 line we have their call number for thirteen months in our system from their last latest call and use the call number as anti-data so our vendor, Barbaricum, can contact them by just their telephone number to ask them if they want to participate in a survey. The ani-data is the sampling plan which is chosen at random by Barbaricum to get the 600 participants per month.				
Administration of the Instrument  1. How will you collect the information? (Check all to a line of Social Media [X] Telephone  [ ] In-person [ ] Mail	hat apply)			

[ ] Other, Explain

2. Will interviewers or facilitators be used? [X] Yes [] 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"

[Drawing]

**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.

**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.

**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.

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