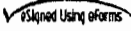




U.S. Department of State

**REQUEST FOR APPROVAL UNDER THE "GENERIC CLEARANCE
FOR THE COLLECTION OF ROUTINE CUSTOMER FEEDBACK"
OMB CONTROL NUMBER: 1405-0193**

Title of Information Collection		Consular Services: Nonimmigrant Visa Applicant Satisfaction Survey	
Purpose			
<p>The Bureau of Consular Affairs (CA) desires to assess nonimmigrant visa applicant satisfaction with a number of operational issues related to processing of nonimmigrant visas at approximately 200 consular sections overseas. Last year, CA adjudicated over 11 million nonimmigrant visa applications. To achieve good customer service and make appropriate use of scarce resources, CA would specifically appreciate feedback from nonimmigrant visa applicants on the quality of our visa information, the accessibility of that information, the convenience of our appointment systems, and the professionalism of consular personnel.</p> <p>CA intends to use software to aggregate survey responses to facilitate the identification and analysis of global trends as well as provide each post the views of local respondents.</p>			
Description of Respondents			
Respondents are foreign nationals who have applied for a nonimmigrant visa. Respondents may also be the parent or guardian of a minor who is seeking a nonimmigrant visa.			
Type of Collection: (Check one)			
<input type="checkbox"/>	Customer Comment Card/Complaint Form	<input checked="" type="checkbox"/>	Customer Satisfaction Survey
<input type="checkbox"/>	Usability Testing (e.g., Web site or Software)	<input type="checkbox"/>	Small Discussion Group
<input type="checkbox"/>	Focus Group	<input type="checkbox"/>	Other _____
Certification			
I certify the following to be true:			
<ol style="list-style-type: none"> 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 (Last, First, MI)		Title	
Signer Email Address		Date (mm-dd-yyyy)	
<input type="text" value="barrycm@state.gov"/>		 <input type="text" value="09-18-2015"/>	

TO ASSIST REVIEW, PLEASE PROVIDE ANSWERS TO THE FOLLOWING QUESTIONS.

Personally Identifiable Information

1. Is personally identifiable information (PII) collected? Yes No
 a. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? Yes No
 2. If Applicable, has a System of Records Notice been published? Yes No

Gifts or Payments

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

BURDEN HOURS

Category of Respondent	Number of Respondents	Participation Time (Minutes)	Burden Hours
Individuals or Households	30,000	5	2,500.00
Totals	30,000	5	2,500.00

FEDERAL COST

The estimated annual cost to the Federal government is \$10,000.00

IF YOU ARE CONDUCTING A FOCUS GROUP, SURVEY, OR PLAN TO EMPLOY STATISTICAL METHODS, 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? 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.

In those areas, where nonimmigrant visa applicants are likely to have access to the internet, such applicants would be informed by consular personnel during their visit to the visa unit of the url or QR code for the survey. Applicants may thus take the survey while waiting in the consular section, or they may do so later at their home or office.

Our greatest volume of nonimmigrant visa applicants reside in countries where internet access is widely available. Consular personnel will encourage applicants to respond to the survey during the last quarter of CY 2015. CA will then assess the utility of the methodology and consider how we might reach potential respondents who do not have reliable access to the internet in a cost effective manner.

Administration of the Instrument

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

- Web-based or other forms of Social Media
 Telephone
 In-person
 Mail
 Other, Explain

2. Will interviewers or facilitators be used? Yes No

PLEASE MAKE SURE THAT ALL INSTRUMENTS, INSTRUCTIONS, AND SCRIPTS ARE SUBMITTED WITH THE REQUEST.

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OMB CONTROL NUMBER: 1405-0193
INSTRUCTIONS**

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.

Number 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 by the participation time, and 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.

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