## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 2700-0153)

**TITLE OF INFORMATION COLLECTION:** ODEO Post MAP Survey

**PURPOSE:** Office of Diversity & Equal Opportunity (ODEO) wants to conduct a survey to gauge their MAP Program. This survey will be used to gauge feedback from customer’s who have been a part of the MAP Program. The feedback from the survey will be used to better enhance customer’s experience in the future.

**DESCRIPTION OF RESPONDENTS**:

NASA HQ Civil Servants and Contractors who have been a part of the MAP Program.

**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: Nicole Lassiter

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 [ x] No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [ ] Yes [x] No

**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** |
| Private Sector (NASA HQ Contractors) | 1,942 | 3 Minutes(1/20 hour) | 97.1 hours |
| Federal Government (NASA HQ Civil Servants) | 1,277 | 3 minutes(1/20 hour) | 63.85hours |
| **Totals** | **3,219** |  | **160.95** |

**FEDERAL COST:**

The estimated annual cost to the Federal government is $4,828.50 at $30/user/hour for 3,219 [100% response rate] survey users [multiplied by the burden] 160.95 x $30 = $4,828.50.

**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?

Potential respondents will be HQ Employees (3,219 employees) who have been a part of NASA’s MAP Program. We will administer the survey through a link that has been provided through Key Survey. We will email 100% of individuals who engaged in the MAP Program in hopes of receiving a 50% response rate. Source of HQ Employees: IdMAX – that’s the “source of record” for identity information.

**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

[x] Other, (HQ Users will be emailed a link to complete the survey in Key Survey:

<https://keysurvey.hq.nasa.gov/f/331967/7d48/>

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