**SUPPORTING STATEMENT A**

Fellowship Management System (FMS)

OMB Control No. 0920-0765

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**Project Officer**

Isabella Hardwick, MPH

Health Scientist

Division of Scientific Education and Professional Development (DSEPD)

Center for Surveillance, Epidemiology and Laboratory Services (CSELS)

Office of Public Health Scientific Services (OPHSS)

Centers for Disease Control and Prevention (CDC)

1600 Clifton Road Northeast, Mailstop E-92

Atlanta, GA 30333

Phone: 404-498-0241

Fax: 404-498-6535

Email: uxd6@cdc.gov

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* Goal of the collection: To help CDC meet the training needs of voluntary applicants who seek to meet the needs of a continually evolving public health workforce
* Intended use of resulting data: To aid in the efficient and effective review of fellowship applications, fellowship host site proposals, and fellowship alumni experiences
* Methods proposed to collect: Online, using skip patterns and a robust, flexible data management system
* Subpopulations for data collection: Nonfederal fellowship applicants, fellowship alumni, and public health agencies
* How data will be analyzed: Data will be analyzed in the aggregate only for internal reports to provide trends and program data for DSEPD leadership and fellowship managers

# A. Justifications

## 1. Circumstances Making the Collection of Information Necessary

The CDC requests a three-year extension of the Office of Management and Budget (OMB) control number 0920-0765 and the information collection project titled *CDC Fellowship Management System (FMS).* The control number for this information collection project expires April 30, 2018.

FMS is a web-based, flexible, and robust data management system that allows CDC to electronically collect and process fellowship applications, fellowship assignment proposals, and fellowship alumni information from nonfederal persons. Programs collecting information through the approved FMS data collection instruments have slight variations in specific data elements, based on the needs of the fellowship. FMS is vital to CDC’s ability to protect the public’s health by supporting training opportunities that strengthen the public health workforce.

This request for extension includes all nonsubstantive changes to FMS since its last approval in 2015. Respondent types and burden hours for each data collection are specific to nonfederal applicants and employees of nonfederal public health agencies who voluntarily apply for participation in FMS programs.

By providing CDC with an efficient, effective, and secure electronic mechanism for collecting and processing fellowship information, FMS optimizes CDC’s ability to provide continuous fellowship service delivery that builds and sustains public health capacity, helps to save lives, and protects people from health threats. Critical components of FMS help improve the matching process of fellowship assignment proposals with qualified fellowship applicants by matching interests and skills of qualified fellowship candidates with host (work) site needs. The best matches between fellows and assignments typically lead to long-term employment and the sustained public health capacity of state, tribal, local, and territorial public health agencies and organizations, thus strengthening the pipeline to the public health workforce.

FMS also maintains a current alumni database, generating fellowship program reports and documenting the impact of fellowships on alumni careers and the public health workforce. Through the FMS Alumni Directory, CDC is able to identify alumni possessing mission-critical skills to respond to a national public health emergency or an urgent public health need. Thus, much of the information collected is in identifiable form.

As CDC fellowship programs grow, more fellowship candidates apply through the FMS Application Module, and more public health agency staff propose to host fellows through the FMS Host Site Module. Over the years, FMS has enhanced information collection resulting in improved accuracy, readability, timeliness, completeness, and consistency of information submitted in a streamlined, standardized format across all fellowships. The increasing volume of applications and data verifies that continued use of FMS by CDC is necessary to streamline electronic collection and fellowship processes, such as reviewing applications, selecting candidates and host (work) sites, and monitoring the impact on alumni and the public health workforce. All FMS data collections align with HHS’s strategic goal to strengthen nation’s health and human services infrastructure and workforce (U.S. Department of Health and Human Services Strategic Plan, Foster a 21st Century Health Workforce).

## 2. Purpose and Use of Information Collection

The Public Health Service Act authorizes this data collection in §301, Title 42 U.S.C. §241(a):  Research and Investigations Generally (Attachment 1, Authorizing Legislation). CDC programs use FMS to collect administrative data including applications, assignment proposals, and alumni updates for seven CDC fellowships programs. The mission of DSEPD is to improve health outcomes through a competent, sustainable, and empowered public health workforce. Professionals in public health, epidemiology, medicine, economics, information science, veterinary medicine, nursing, public policy, and other related professionals seek opportunities through CDC fellowships, to broaden their knowledge and skills to improve the science and practice of public health. Fellowship programs reside in two CDC CIOs: the Division of Scientific Education and Professional Development (DSEPD), Center for Surveillance, Epidemiology and Laboratory Services (CSELS) of the Office of Public Health Scientific Services (OPHSS); and, in the Office for State, Tribal, Local and Territorial Support (OSTLTS). Fellowships assign fellows to host (work) sites in both federal and nonfederal public health agencies and organizations. Assignments include state, tribal, local, and territorial public health agencies, such as CDC and HHS, and operational divisions, such as the Centers for Medicare & Medicaid Services and the Indian Health Service. Nongovernmental assignments include academic institutions, tribal organizations, and private public health organizations. These assignments provide opportunities for CDC fellows to build and sustain public health capacity both during and after their fellowships. Approximately 85% of CDC fellowship program graduates obtain jobs working in public health, and many of them remain in the same host programs that provided applied, on-the-job learning in their fellowship experiences.

On average, CDC collects FMS data yearly; however, use of each data collection module differs among fellowships; for example, Public Health Associate Program (PHAP) uses only a portion of the application module, and typically, alumni will update data once every 3 years. CDC fellowship programs that use the FMS Application Module are EIS, PHAP, PEF, PHIF, Epi-Elect, Hubert, PMR/F, and Science Ambassadors. Fellowship programs that use the FMS Host Site Module (Attachment 5) to collect information from employees of non-federal public health agencies include EIS, PHAP, and PMR/F programs. PEF, PHIF, Epi-Elect, and Hubert programs use the FMS Host Site Module to collect assignment proposals only from federal government respondents (i.e., CDC staff at headquarters or in field locations). These programs collect applications (Attachment 3) and host (work) site assignment proposals only once every fellowship cycle. All fellowships occur once during the calendar year, except for Epi-Elect, which has fall and spring rotation cycles.

Fellowship programs that use the FMS Alumni Directory to collect information from alumni include EIS and Hubert programs. Alumni who voluntarily participate in the alumni directory have the option of providing updates when their information changes. Alumni might use the directory for maintaining professional networks for finding jobs, staffing jobs, collaborating, and interacting with other alumni. Alumni have two options for the level of information they wish to be visible to other alumni who have access to the directory. They have the options of displaying only their name and fellowship year or all of the information they entered. The default is to display only the name and fellowship year; this information is already in the public domain.

A 3-year extension of FMS approval will allow CDC to continue use of the standardized, electronic tool that streamlines the collection and processing of fellowship applications and assignment proposals, as well as collection of alumni information. CDC uses this information to document the impact of the fellowships on the career paths of participants, and thus, on the science and practice of public health. FMS has reduced the burden of manual, paper-based processes and improved the convenience and efficiency of submission by applicants, alumni, and health department representatives who, after the initial submission, can use the same login and password, to access, copy, revise and update information for submissions to additional fellowships or in fellowships in subsequent years. If FMS were not available for data collections, CDC would not able to efficiently or effectively select fellows for public health training, facilitate or maintain professional networks, assist in finding jobs, staffing those jobs, foster collaboration among alumni, or contact alumni with mission-critical skills to respond to a national public health emergency.

## 3. Use of Improved Information Technology and Burden Reduction

Since 2015, OMB has approved nonsubstantive changes to FMS ICRs for Science Ambassadors, the Preventive Medicine Residency Fellowship (PMR/F), and the Public Health Associate Program (PHAP). These modifications were approved because they help to meet the needs of an evolving public health workforce and support CDC’s goals to continue to improve respondent reporting and reduce respondent burden. Changes further enhanced the efficiency and effectiveness of FMS data collections, helping CDC to improve participant selections. Changes allow collection of only the minimum amount of information for selecting fellowship participants and host (work) sites and result in more accurate representations of applicants’ abilities to contribute to the public’s health. One hundred percent (100%) of the information and data, all submitted voluntarily by applicants and agencies, are collected electronically, through FMS (Attachments 3–5).

This electronic data collection also provides more effective and efficient submissions, reviews, selections, and matching processes. Applicants to fellowships and public health agencies proposing to host fellows for one or more CDC fellowships, or in subsequent years, will enter their information only once and update as necessary. Alumni who choose to participate in the alumni directory have the option of providing updates when their information changes, which occurs, on average, every three years. The use of technology for electronic submission eliminates cumbersome paper processing and reduces errors.

FMS is a secure electronic data management system that collects and processes information for CDC’s fellowship programs. FMS includes technology that validates completeness of data entry. Using an electronic system for fellowship application and host site assignment proposals saves time associated with reviewing for completeness, as compared to the amount of time associated with processing a paper-based system. CDC fellowship staff use the information submitted to review and evaluate the applications and host site assignment proposals for selection of quality candidates, fellow assignments at public health agencies, and to improve matching between fellows and host sites. Data also are used to generate fellowship program reports and document the impact of fellowships on alumni careers and the public health workforce. FMS offers practical utility to users by allowing easy, secure submission of applications and proposals as compared with paper-based, postal delivery systems. FMS also provides increased efficiency and accuracy to fellowship programs to what would be an otherwise cumbersome, inefficient, tedious, and complicated task of manually collecting, sorting, and computing, information from paper submissions when electronic technology is available to complete these tasks more quickly and accurately.

The FMS information and data collection system assures compliance with the Government Paperwork Elimination Act (GPEA), Public Law 105-277, title XVII, 1998; lowers the burden to the respondents, as compared with paper-based systems; allows respondents to submit information to CDC electronically; and provides capabilities for CDC to maintain secure electronic records.

## 4. Efforts to Identify Duplication and Use of Similar Information

Information collected through FMS is for the completion of fellowship-related submissions and is not available from any other source. Data are requested via FMS only; no other CDC component requests this information. There are no duplications of this data.

## 5. Impact on Small Businesses or Other Small Entities

No small businesses have been, are, or will be involved in FMS data collection. For the FMS Application Module (Attachment 3) and FMS Alumni Directory (Attachment 4), data are collected from medical and veterinary students, physicians, dentists, veterinarians, nurses, epidemiologists, educators, pharmacists, attorneys, economists, statisticians, graduates of MPH programs, and others. These respondents represent the majority of the target audience of fellowship candidates and alumni who enter information into FMS. The information requested is necessary for those who choose to apply to a fellowship and is voluntary for the alumni directory. Proposal data for the FMS Host Site Module (Attachment 5), are collected from employees of public health agencies including physicians, veterinarians, epidemiologists, public health educators, and public health managers. Data collected from employees in public health agencies are required only from those interested in hosting a fellow. Only the minimum data required for use is collected.

## 6. Consequences of Collecting the Information Less Frequently

The timeliness of data collection during the fellowship application process (Attachment 3, FMS Application Module) is critical. Applications are collected through FMS annually, once per fellowship cycle; all fellowship cycles occur once per calendar year except for Epi-Elect, which has a fall and a spring rotation. However, the timeliness of data collected during the alumni tracking process (Attachment 4, FMS Alumni Directory) is less critical. The timeliness of data collected from public health agencies submitting assignment proposals (Attachment 5, FMS Host Site Module), is for an agency to be selected to host a fellow during a given fellowship year. Assignment proposals submitted after fellows have been selected are not considered for that fellowship year. Fellowship assignment proposals are collected through FMS annually, once per fellowship cycle. Public health agencies have the opportunity to resubmit proposals with updated information in subsequent years if they wish to continue hosting fellows.

There are no legal obstacles to reduce the burden.

## 7. Special Circumstances Relating to the Guidelines of CFR 1320.5

This request fully complies with the regulation 5 CFR 1320.5.

## 8. Comments in Response to the Federal Register Notice and Efforts to Consult Outside the Agency

1. The agency’s notice of proposed extension to the existing data collection was published in the Federal Register on September 5, 2017 (Vol. 82, No. 170, pp 41963-41964) (See FRN, Attachment 2.) CDC received two nonsubstantive comments in response to the notice, and DSEPD responded with a standard response, as comments did not relate to the specific request.
2. The FMS Steering Committee and FMS Change Control Board ensures that external input from those who interact with FMS is collected and acted upon. Individual fellowship programs collect information from their stakeholders (e.g., fellowship directors, fellowship applicants, supervisors at host sites, and fellowship alumni) after each annual information collection cycle, and this information is used by the DSEPD Information Technology (IT) Team to drive the ongoing improvement of FMS information collection.

## 9. Explanation of Any Payments or Gifts to Respondents

There are no payments or gifts provided to respondents.

## 10. Assurance of Confidentiality Provided to Respondents

CDC fellowship staffs use information that is voluntarily submitted by applicants (Attachment 3, FMS Application Module), public health agencies (Attachment 5, FMS Host Site Module), and alumni (Attachment 4, FMS Alumni Directory). This information is integral to processing applications, selecting qualified candidates and quality assignments, matching fellows to host sites (work) assignments, and maintaining a current alumni database to document the impact of the fellowships on alumni careers. Those interested in applying and public health agencies interested in hosting fellows voluntarily submit information into the FMS Application and Host Site Module. Participation in the Alumni Directory (Attachment 4) is voluntary and fellows are encouraged to participate in their fellowship’s alumni directory upon graduation. Alumni are asked upon each login for their consent to share their information with other alumni who have access to the directory. If an alumnus declines to share, only his or her name and fellowship year, which are already in the public domain, will be visible to other alumni who participate in the directory.

No identifiable data or individual respondent data from the Application and Host Site Modules will be shared beyond the purpose of processing, selecting, and matching candidates and host sites. No identifiable data or individual respondent data from the Alumni Directory will be shared beyond the purpose of professional networking among alumni and to present opportunities for alumni with mission-critical skills to respond to national public health emergency or an urgent public health need. Programmatic data from FMS are reported in aggregate to provide program reports on programmatic processes, trends, and performance information, such as the number and types of applicants and host sites, number of selected and matched candidates and assignments, and demographics of alumni (e.g., employed in private or government sector).

FMS allows CDC fellowship staff to use the information collected through the password- and firewall-protections to efficiently process applications and host site assignment proposals, to review and select quality candidates and host site assignments, and to improve the matching of fellows to assignments. Alumni use the information collected through the password- and firewall-protected FMS to network and interact with other alumni participating in the alumni directory; for example, they can share professional information, job positions, and opportunities to respond to public health emergencies and urgent needs. This data collection has little to no effect on the privacy of the public health professionals and staff of public health agencies, who voluntarily submit information through FMS. No sensitive information is collected. IIF collected from the three proposed data collections (Attachment 3, 4, 5) are minimal. IIF collected from applicants and alumni includes name, mailing address, phone numbers, e-mail address, education records, visa information, employment status, and information critical for assessing eligibility of and communicating with applicants or alumni. IIF collected from public health agencies include the agency’s name; location; type of public health agency; mailing address; phone numbers; e-mail addresses; and names; and titles of primary and secondary supervisors or mentors.

FMS collects fellowship applications and host (work) site assignment proposals to help select qualified fellowship candidates, match selected candidates with selected assignments, and store information on fellowship alumni. FMS maintains a current alumni database; generates fellowship program reports; and documents the impact of fellowships on alumni careers and the public health workforce. Through the FMS Alumni Directory, CDC is able to identify alumni possessing mission-critical skills to respond to a national public health emergency or an urgent public health need. Thus, much of the information FMS collects is in identifiable form. All FMS data collections align with HHS’s strategic goal to strengthen nation’s health and human services infrastructure and workforce (U.S. Department of Health and Human Services Strategic Plan, Foster a 21st Century Health Workforce).

Information in identifiable form (IIF) (Attachment 3), FMS Alumni Directory (Attachment 4), and FMS Host Site Module (Attachment 5) is needed to process application data, select qualified candidates, match qualified candidates with host public health agencies, maintain a current alumni database, document the impact of the fellowships on alumni careers, and generate fellowship program reports. This information is stored and retrieved by appropriate CDC fellowship staff but is not published. For fellowship program applicants, IIF includes name, mailing address, phone numbers, e-mail address, educational records, citizenship and visa information, professional licensure, and employment status. Non-IIF includes fellowship entry year, work experience, volunteer activities, research grants, presentations, publications, interests, skills, and abilities.

For the FMS Host Site Module (Attachment 5), IIF collected from employees of public health agencies who submit assignment proposals includes the name, location, type of public health agency, mailing address, phone number(s), e-mail address(es), and names, and titles, of primary and secondary supervisors or mentors. Non-IIF includes activities the fellows will engage in, type of support and training the fellows will receive, extent of mentorship and supervision for the fellows, and additional professional development opportunities and collaborations that might be available for fellows.

On average, CDC collects FMS data yearly; however, use of each data collection module differs among fellowships; for example, PHAP uses only a portion of the Application Module, and typically, alumni will update data once every 3 years. CDC fellowship programs that use the FMS Application Module are EIS, PHAP, PEF, PHIF, Epi-Elect, Hubert, PMR/F, and Science Ambassadors. Fellowship programs that use the FMS Host Site Module (Attachment 5) to collect information from employees of public health agencies include EIS, PHAP, and PMR/F programs. PEF, PHIF, Epi-Elect, and Hubert programs use the FMS Host Site Module to collect assignment proposals only from CDC staff at headquarters or in field locations (U.S. and international). These programs collect applications (Attachment 3) and host sites assignment proposals (Attachment 5) only once every fellowship cycle. All fellowships occur once during the calendar year, except for Epi-Elect, which has fall and spring rotation cycles.

Fellowship programs that use the FMS Alumni Directory to collect information from graduates and alumni include EIS and Hubert programs. Alumni who choose to participate in the alumni directory have the option of providing updates when their information changes.

The first time that an applicant submits an application to the fellowship or a designated employee of a public health agency submits an assignment proposal electronically through FMS, the applicant or employee will receive a secure and unique login and password allowing them to enter their information only once. When additional applications are submitted to the same or other CDC fellowships in subsequent years, the applicant or the public health agency employee will use the same login and password to access application data in FMS, copy, revise, and submit updated versions to one or more fellowships. To support this feature, data are stored indefinitely and maintained securely in FMS so that applicants and host site representatives can update their information when they wish to apply to other fellowships. Alumni data is also stored indefinitely through the secured FMS to track and document impact of the fellowships on alumni careers; provide alumni an opportunity to network with each other; and present opportunities to alumni to respond to a national public health emergency or an urgent public health need.

Completed applications and host site assignment proposals for the different fellowships are compiled in standardized PDF reports for online review by multiple CDC reviewers in the Reviewer Module of FMS, with an option for printing. Through the FMS Administrator Module, fellowship administrators and programmatic staff are able to process applications and host site assignment proposals, compile their reviews, schedule interviews, select candidates, and match candidates to selected host site assignment. Both fellowship staff and applicants are able to track this process and the status of the onboarding process through FMS.

Approval by the CDC Institutional Review Board (IRB) is not required for this information collection system. This data collection is not considered research. This conclusion is based on the description and justification for FMS and on the definition of research, as defined by the federal policy for the protection of human subjects (45 CFR 46) (Attachment 8, Research Determination Memorandum).

This submission has been reviewed by staff in the CDC ICRO who determined that the Privacy Act does apply. The applicable System of Records Notice is 09-20-0112, "Fellowship Program and Guest Researcher Records. HHS/CDC/AHRC”. Data are password protected and reside on a server managed by the Application Hosting Branch (AHB) of CDC’s Information Technology Services Office (ITSO) under strict physical security. ITSO Data Center personnel have access to the physical server.  Registrant data will not be sold, rented, or shared with third parties for their promotional use.  All data are maintained behind a strict firewall with security protection.

All modules in FMS are front-end web pages with a backend database, automating existing manual processes. The data for the Application Module, Host Site Module, and Alumni Directory are submitted through the Internet. All FMS modules operate on Internet Information Services (IIS) web servers supported by ITSO. FMS modules were developed with the ASP.NET Web application framework. FMS modules use a firewall permit for the application to access stored procedures and data on a Microsoft SQL Server® running on AHB servers. Data are stored and regularly backed up on a secure Microsoft SQL Server® database located behind the CDC firewall. Access to information on the CDC Microsoft SQL Server® database is available only through FMS for DSEPD programmatic personnel and IT staff. Security provisions for data storage meet all requirements established by CDC’s Information Council Executive Committee. The Privacy Act statement will be included on all screens stating, “Furnishing the information requested is voluntary.”

Persons who wish to apply to a fellowship (Attachment 3, FMS Application Module) do not require consent to apply. Upon logging in to apply, applicants are informed immediately that their information will not be shared and will be used only by the fellowship to which they are applying during the initial review and selection process.

Participation in the alumni directory (Attachment 4) is voluntary, and fellows are encouraged to participate in their fellowship’s alumni directory upon graduation. Each time alumni log on to their fellowship alumni directory, they are asked immediately if they wish to share their information with other alumni who have access to the alumni directory (See Electronic Consent Statement in Attachment 4, FMS Alumni Directory). If a respondent consents, his or her information will be visible to other alumni who participate in the fellowship alumni directory. If a respondent does not consent, only his or her name and fellowship year, which already are in the public domain, will be visible to other alumni who participate in the fellowship alumni directory. All data are merged from the FMS’s Fellowship Application Module into the Alumni Directory for each alumnus. Editing data does not require data re-entry.

Employees of public health agencies who wish to submit an assignment proposal to host a fellow (Attachment 5, FMS Host Site Module) does not require consent. Submitting an assignment proposal is voluntary. Agency employees are immediately informed that their information will not be shared and is used only by the fellowship to which they are submitting the assignment proposal during the initial review and selection process. Data collected for the host site module are needed to select quality assignments and to match fellows with host sites that provide the fellow with the best possible fellowship experience and result in long-term careers that will allow long-term and sustainable contributions to public health and its body of knowledge.

Information collected for the FMS Application Module (Attachment 3), FMS Alumni Directory (Attachment 4), and FMS Host Site Module (Attachment 5) are needed to process application data, select qualified candidates, match qualified candidates with host public health agencies, maintain a current alumni database, document the impact of the fellowships on alumni careers, and generate fellowship program reports. Personally identifiable information will be stored and retrieved by appropriate CDC fellowship staff but will not be published.

DSEPD’s Information Systems Security Officer has reviewed this request and determined that the Privacy Act does apply. FMS collects only the minimum data elements necessary to satisfy the requirements for application submission and processing (Attachments 3–5). Collected information from applicants and alumni that are not IIF include fellowship entry year, work experience, volunteer activities, research grants, presentations, publications, interests, skills, and abilities. Collected information from employees of public health agencies that are not IIF include activities the fellow will engage in, type of support and training the fellow will receive, and additional professional development opportunities and collaborations that might be available for the fellow.

Personal identifiable information is stored on the CDC Microsoft Structured Query Language (SQL) Server® database and is only available through FMS to DSEPD programmatic personnel and IT staff. Data collected through FMS are necessary for processing applications (Attachment 3, FMS Application), selecting qualified candidates, processing host site assignments (Attachment 5, FMS Host Site Module), selecting quality assignments, matching fellows to host site assignments, and documenting the impact of fellowships on alumni careers (Attachment 4, FMS Alumni Directory).

## 11. Justification for Sensitive Questions

No questions of a sensitive nature are asked of respondents.

## 12. Estimates of Annualized Burden Hours and Costs

Pilot tests were conducted for all nonsubstantive changes to improve usability and determine response times. This ICR for extension reflects all changes to FMS data collections since the approval for change request in 2017.

The respondent types included in the burden estimates for this ICR are nonfederal applicants, alumni, and employees of public health agencies. The target respondent universe for each data collection differs for each fellowship program. Annualized burden hours and costs presented include only the burden of respondents who are not federal employees or entities.

Use of each data collection module differs among fellowships; for example, PHAP uses only a portion of the Application Module (Attachment 3). The calculated annualized burden and costs for each data collection module take into consideration the variances for each fellowship, the increase in voluntary submission of applications by applicants and employees of public health agencies each year, and an adjustment for increased cost of living in respondents’ estimated salaries.

#### Estimated Annualized Burden Hours

The FMS Application Module (Attachment 3) reflects an average of 1 and 45/60 hours (i.e., 105 minutes). The approved ICR for FMS data collection is for an estimated 3,931 respondents. Respondents in the approved ICR respond one time with an average burden of 48 minutes per response. The estimated 150 Science Ambassador respondents and 30 nonfederal applicants are included in the 2,141 total number of fellowship applicants; their burden times per response did not affect the average burden for any applicant group. Therefore, the total estimated average annualized burden is 4,556 hours.

The total estimated annualized burden for the FMS Alumni Directory (Attachment 4) and the FMS Host Site Module (Attachment 5) have not changed.

Following is a table showing the average total response burdens for current FMS application modules by respondent type.

Estimated Annualized Burden Hours\*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type of respondents | Form | Number of respondents | Frequency of Response | Average Burden Time per Response  (in hours) | Average total Response Burden (in hours) |
| Fellowship applicants | FMS Application Module | 1,991 | 1 | 1.75 | 3,485 |
| Science Ambassadors Applicants | FMS Application for Science Ambassadors | 150 | 1 | 45/60 | 113 |
| Fellowship alumni\* | FMS Alumni Directory | 1,382 | 1 | 15/60 | 346 |
| Public Health Agency or Organization Staff | FMS Host Site Module | 408 | 1 | 1.5 | 612 |
| Total |  | 3,931 |  |  | 4,556 |

\* Some alumni are deceased or cannot be located. Response burden assumes response from one responding alumnus, on average, every three years (which is likely an overestimate of frequency).

#### B. Estimates of Annualized Cost to Respondents

There is no cost to respondents other than their time to complete the data collection. The following sources were used to determine the average salaries of fellowship applicants and alumni:

* Graduate Student Intern Salaries in USA, <http://www.indeed.com/salary?q1=GRADUATE+STUDENT+INTERN&l1=US>
* Salary Table GS, 2017, <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/17Tables/html/GS_h.aspx>
* US Department of Labor, Bureau of Labor Statistics <http://www.bls.gov/oes/current/oes_nat.htm>

The following source was used to determine the average salaries of employees of public health agencies who submit assignment proposals:

* US Department of Labor, Bureau of Labor Statistics <http://www.bls.gov/oes/current/oes_nat.htm>

The estimates of annualized cost burden to respondents for each of the data collections –the FMS Application Module (Attachment 3), FMS Alumni Directory (Attachment 4), and FMS Host Site Module (Attachment 5).

The calculation for average hourly wage rate takes into consideration an adjustment for cost of living since 2015 as well variations among respondent demographics (e.g., level of education and employment categories. The annualized cost burden calculation considers the percentage of respondents represented by fellowship programs.

The annualized cost burden to applicants, alumni, and employees of public health agencies has not significantly increased since 2015.

Estimated Annualized Burden Costs\*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Type of respondents | Form | Number of respondents | Frequency of Response | Average Burden per Response  (in hours) | Average Hourly Wage Rate | Total Respondent Cost |
| Fellowship applicants | FMS Application Module | 1991 | 1 | 1.75 | $30.05 | $104,701.712 |
| Science Ambassadors Applicants | FMS for Science Ambassadors | 150 | 1 | 45/60 | $24.40 | $2,745.00 |
| Fellowship alumni | FMS Alumni Directory | 1382 | 1 | 15/60 | $75.01 | $25,915.95 |
| Public Health Agency or Organization Staff | FMS Host Site Module | 408 | 1 | 1.5 | $61.27 | $37,497.24 |
| Total |  | 3931 |  |  | $47.68 | $170,895.902 |

\* Some alumni are deceased or cannot be located. Burden assumes one alumnus responds every three years is likely an overestimate of frequency. Average hourly wage rate takes into consideration an adjustment for cost of living since 2015, as well variance among respondent types (e.g., level of education and employment categories).

## 13. Estimate of Other Total Annual Cost Burden to Respondents or Record Keepers

There are no other capital or maintenance costs to respondents.

## 14. Annualized Cost to the Government

Costs are based on FMS current requirements identified by fellowships to ensure that information collection supports the necessary evolution of fellowship implementation and management.

The estimated cost to operate and maintain currently approved FMS components over three years is $2,550,000.  The annualized cost to the government is $850,000. No development costs are anticipated for FMS over the next three years.

|  |  |  |
| --- | --- | --- |
| Item | Cost Categories | Annualized Cost to Federal Government |
| Operations & Maintenance (O&M) Cost | Project Management\* | $130,000 |
|  | Business Analyst\* | $80,000 |
|  | Programming & QA\* | $530,000 |
|  | ITSO Infrastructure\* | $10,000 |
|  | C&A\* + CPIC\* | $48,000 |
|  | CDC FTE Costs | $48,000 |
| Total O&M Cost |  | $850,000 |
| Total Annualized Cost |  | $850,000 |

\*Contractor Costs

## 15. Explanation for Program Changes or Adjustments

This ICR requests an extension for the currently approved FMS data collection without any substantive changes. In 2015, OMB approval for revision was granted for FMS for a 3-year period. Since 2015, OMB has approved nonsubstantive changes to FMS information collection requests under the same OMB control number, 0920-0765. These changes were made to accurately reflect evolving fellowship eligibility requirements, provide clarification of existing questions, efficiently and effectively accommodate changing needs of host organizations, and to account for the addition of 150 new applicants to the Science Ambassadors Fellowship. A three-year extension will allow all fellowship applicants, public health agencies that host fellowship participants and fellowship alumni the continued use of FMS for the submission of electronic data.

The respondent types and burden hours included for each data collection included in this ICR are nonfederal applicants, alumni, and employees of public health agencies. As fellowship programs continue to grow, increases in annualized burden hours are the result of the number of respondents who voluntarily submit information for each data collection. More applicants and host sites are submitting applications for fellowship programs, and more graduates are updating their information via FMS Alumni Directory.

## 16. Plans for Tabulation and Publication and Project Time Schedule

This is a request for a three-year extension to the currently approved FMS data collection. Internal reports will be generated using available FMS data elements to provide trends and program data for DSEPD leadership and fellowship managers. Staffs from each fellowship program collect the information and compile them for inclusion in program reports documenting fellowship progress and performance; only aggregate data are reported. Programmatic data from FMS reported include trends and program data such as the number and types of applicants and host sites, number of selected and matched candidates and assignments, and demographics of alumni (e.g., employed in private or government sector). The data elements for the EIS example for the FMS Application Module (Attachment 3) and the FMS Alumni Directory (Attachment 4), and the PHAP example for the FMS Host Site Module (Attachment 5) are documented with screenshots and dedicated tables indicating the those and additional data elements collected by other specified fellowship programs.

Timeline of Key Events following Receipt of OMB Approval to ICR

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Key Events** | | | | | **Timeline** | |
| Continue collecting **Host Site Assignment Proposals** from nonfederal public health agencies for EIS, PHAP, and PMR/F | | | | | Immediately upon receipt of approval | |
|  | | | | | | |
| Continue collecting **Application** information for all fellowships from nonfederal applicants | | | | | | Once per year for three years |
| Fellowship | Start Collection | End  Collection | Check Completeness | Selection process | |
| EIS | May 1 | Sep 15 | May 1– Sep 15 | Oct 1–May 15 | |
| PEF | Sep 1 | Feb 1 | Oct 1–Feb 15 | Feb 15 – Apr 15 | |
| PHIF | Jul 1 | Dec 15 | July 1–Dec 15 | Mar 1 – May 15 | |
| Epi-Elect, Fall Rotations | Jan 1 | Mar 30 | Jan 1–Mar 30 | May 1 – Aug 15 | |
| Epi-Elect, Spring Rotations | Mar 1 | May 30 | Mar 1–May 30 | Jul 1–Oct 15 | |
| Hubert | Jan 1 | Feb 28 | Jan 1–Mar 15 | Apr 1–May 15 | |
| PMR/F | May 1 | Oct 15 | May 1–Oct 15 | Oct 15–Feb 15 | |
| PHAP | Feb 1 | May 15 | Feb 1–May 15 | Apr 15–Jul 15 | |
| Science Ambassadors | Nov 15 | Feb 15 | March–April | Apr 15–Apr 30 | |  |
| Check **Alumni Directory** data for completeness | | | | | | Every three months for 3 years |
|  | | | | | | |
| End data collection and obtain extension from OMB | | | | | | 3 years after receipt of approval |

## 17. Reasons Display of OMB Expiration Date is Inappropriate

CDC is not requesting an exemption from displaying the expiration date.

## 18. Exceptions to Certification for Paperwork Reduction Act Submissions

No exceptions to certification apply to this request.