## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0642; Expiration Date: 08/31/2017)

**TITLE OF INFORMATION COLLECTION:**

Customer Satisfaction Survey for CBIIT Events

**PURPOSE:** CBIIT hosts a variety of events for NCI staff and some public audiences. The purpose of this survey is to assess customer satisfaction at CBIIT hosted events. This data will also be used to improve the quality of future CBIIT events.

**DESCRIPTION OF RESPONDENTS**:

Information will be collected from Federal employees, contractors and the general public. This information collection request is for the collection of information from contractors and the general public.

**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: \_\_Shea Buckman Manley\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [ ] No
3. If Applicable, has a System or 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 [ X] No

**ESTIMATED BURDEN HOURS and COSTS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category of Respondent** | **No. Respondents** | **No. Responses per Respondent** | **Time per Response**  **(in hours)** | **Total Burden**  **Hours** |
| Individuals | 400 | 1 | 3/60 | 20 |
| **Totals** | **400** | **400** |  | **20** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **Total Burden Hours** | **Wage Rate\*** | **Total Burden Cost** |
| Individuals | 20 | $42.37 | $847.40 |
| **Totals** | **20** | $42.37 | $847.40 |

\* Calculated by taking the average of mean hourly wage rate of Management Analysts, (Occupation Code #13-1111) ($44.19) and Operations Research Analysts (Occupation Code #15-2031) ($40.55). <http://www.bls.gov/oes/current/oes_nat.htm#19-0000> -

**FEDERAL COST:** The estimated annual cost to the Federal government is $\_\_168\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary** | **% of Effort** | **Fringe (if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight (Max)** |  |  |  |  |  |
| Communications Manager | Grade 14/Step 6 (Max) | $10,891/mo | 1.25%/mo |  | $136.14 |
| TOTAL |  |  |  |  | $136.14 |

**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 [ X] 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?

The survey will be offered to whomever attends the CBIIT hosted event. The survey audience will be identified either through a registration mechanism, sign in sheet or by providing a hard copy of the survey to the respondent.

**Administration of the Instrument**

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

[ ] Web-based or other forms of Social Media

[ ] Telephone

[X] In-person (Paper)

[ ] Mail

[ ] Other, Explain

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