Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 1880-0542)

TITLE OF INFORMATION COLLECTION: State and Local Education Agency Customer Feedback on Regional Educational Laboratory (REL) Training, Coaching, and Technical Support Activities

PURPOSE: To help the REL program design research project team understand State and Local Education Agency (SEA and LEA, respectively) staff's satisfaction with and use of training, coaching, and technical supports provided by the RELs.

DESCRIPTION OF RESPONDENTS:

TYPE OF COLLECTION: (Check one)

SEA and LEA staff who have participated in REL training, coaching, and technical support activities within the past year. We estimate at there will be approximately 1,005 respondents, each a member of a partnership facilitated by one of the 10 RELs. The SEAs and LEAs will represent each of the 50 states, plus the District of Columbia, Puerto Rico, U.S. Virgin Islands, American Samoa, Palau, Marshall Islands, Guam, Northern Mariana Islands, and the Federated States of Micronesia.

| , | |
|--|----------------------------------|
| [] 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 <u>not</u> 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 <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: Erica Lee

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

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 | Participation | Burden |
|--|-------------|---------------|--------|
| | Respondents | Time | |
| State and local education agency staff | 1,005 | 10 minutes | 168 |
| | | | hours |
| Totals | 1,005 | 10 minutes | 168 |
| | | | hours |

FEDERAL COST: The estimated annual cost to the Federal government is \$65,194.

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?

[] 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?

Abt Associates, the contractor conducting this work, has contacted all 10 REL Directors to obtain a list of partnership members who are employed in SEAs and LEAs and have received REL training, coaching, and technical support in the past year. This will form the sampling frame for the survey. All SEA and LEA staff meeting these criteria will be surveyed.

Administration of the Instrument

| 1. | How will you collect the information? (Check all that apply) |
|----|--|
| | [X] Web-based or other forms of Social Media |
| | [] Telephone |
| | [] In-person |
| | [] Mail |
| | [] Other, Explain |
| 2. | Will interviewers or facilitators be used? [] Yes [X] No |

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