Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB#: 0925-0642, Expiration Date: 3/31/2023)

TITLE OF INFORMATION COLLECTION: NCI $\underline{\text{Exp}}$ lore $\underline{\text{On}}$ $\underline{\text{Site}}$ (EXPOSE) Pre-and Post- Customer Satisfaction Survey

PURPOSE:

The NCI Center for Cancer Training (CCT) wishes to collect information from NCI program stakeholders to better inform service delivery. From July 2020-23, twenty NCI intramural postdoctoral fellows will participate annually in the NCI Explore On Site (EXPOSE) program to gain exposure to careers in the biomedical workforce beyond traditional, academic cancer research. CCT plans to survey the EXPOSE fellows pre- and post-program participation to better understand the fellows' needs and experience and to improve the program for future cohorts. The fellows will complete a pre-survey that reflects their current skills and knowledge prior to participating the in the EXPOSE program. The post-survey will reflect changes in the fellows' skills and knowledge as a result of participating in the program.

DESCRIPTION OF RESPONDENTS:

Respondents will be the 20 NCI postdoctoral fellows who participate in the EXPOSE program.

TYPE OF COLLECTION: (Check one)	
[] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software) [] Focus Group	[X] Customer Satisfaction Survey [] Small Discussion 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 <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: Erika Ginsburg

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

Amount:	
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Explanation for incentive: (include number of visits, etc.)

ESTIMATED BURDEN HOURS and COSTS

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals- Pre-EXPOSE Survey	20	1	10/60	3
Individuals- Post-EXPOSE Survey	20	1	15/60	5
Totals		40		8

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals	8	\$46.36	\$370.88
Total			\$370.88

^{*}Source of the mean Hourly Wage Rate is provided by the Bureau of Labor Statistics, Occupation title "Medical Scientists" 19-1042, https://www.bls.gov/oes/2018/May/oes nat.htm#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is \$1,415.34

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Scientific Program Analyst	14/6	141,534	1%		\$1,415.34
Contractor Cost					\$0
Travel					\$0
Other Cost					\$0
Total					\$1,415.34

^{**}The salary in the table above is cited from: $\frac{https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/20Tables/html/DCB.aspx$

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

Th	e 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?
The customer list consists of the 20 NCI postdoctoral fellows who are selected to participate in the EXPOSE program. CCT intends to invite all 20 fellows by email to take the online pre- and post-program survey to assess knowledge and satisfaction.
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
[] Survey Form
[] Chart Abstraction
[] Other, Explain

2. Will interviewers, facilitators, or research coordinators be used? [] Yes [X] No

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