

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes 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

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? Yes No

Amount: _____

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

ESTIMATED BURDEN HOURS and COSTS

Form Name	Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Combinatorial Therapy	Individuals	180	1	5/60	15
Evolutionary Biology	Individuals	180	1	5/60	15
Tumor Ecosystem	Individuals	180	1	5/60	15
Tumor Heterogeneity & Cell Plasticity I	Individuals	180	1	5/60	15
Tumor Heterogeneity & Cell Plasticity II	Individuals	180	1	5/60	15
Totals			900		75

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	75	\$46.95	\$3,521.25
Total			\$3,521.25

*Source of the mean Hourly Wage Rate is provided by the Bureau of Labor Statistics, Occupation title "Medical Scientists" 19-1040, https://www.bls.gov/oes/2019/May/oes_nat.htm#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is \$1,781.08

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Director	15/3	\$152,215	0.5%		\$761.08
Contractor Cost					\$1,000.00
Travel					\$0
Other Cost					\$0
Total					\$1,761.08

**The salary in the table above is cited from <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:

The selection of your targeted respondents

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 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?

This meeting is advertised through NIH/NCI and NCI Frederick listservs, individual NCI program listservs, NCI Twitter accounts and planning committee members.

Administration of the Instrument

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

Web-based or other forms of Social Media

Telephone

In-person

Mail

Survey Form

Chart Abstraction

Other, Explain

Will interviewers, facilitators, or research coordinators be used? Yes No

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