

**Request for Approval under the “Generic Clearance for the Collection of Qualitative Feedback on Agency Service Delivery” (OMB Control Number: 0690-0030)**

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**TITLE OF INFORMATION COLLECTION:** EDA Grantee Customer Satisfaction Survey

**PURPOSE:** The purpose of the survey is to gather feedback from current recipients of EDA grants and cooperative agreement awards regarding EDA’s award management practices, including the customer service that EDA provides to recipients. This feedback will help EDA to improve its customer service and thereby better accomplish the agency’s mission.

**DESCRIPTION OF RESPONDENTS:** Current recipients of EDA grants and cooperative agreement awards.

**TYPE OF COLLECTION:** (Check one)

- |  |  |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group                  |
| <input type="checkbox"/> Focus Group                                   | <input type="checkbox"/> 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.

Business Unit Certification:                     ORA/PNPD                    

OCIO Certification: \_\_\_\_\_

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
3. If Applicable, has a System or Records Notice been published?  Yes  No – **N/A**

**Gifts or Payments:**

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

## BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
State, local, or tribal governments	72 (estimated)	15 minutes	18 hrs
Non-profit organizations	52 (estimated)	15 minutes	13 hrs
Regional economic development organizations	118 (estimated)	15 minutes	29.5 hrs
Institutions of higher education	30 (estimated)	15 minutes	7.5 hrs
<b>Totals</b>	272		<b>68 hrs</b>

EDA estimates that 100% of the surveys will be submitted electronically. The recipients of the survey have been selected based on their grant closeout date.

**FEDERAL COST:** The estimated annual cost to the Federal government is a GS-13 step 4 at 40 hours: \$59.35 (\$45.66/hr + \$13.69/hr) \* 40 hours = \$ 2,377

**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?  
[ 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?

EDA maintains a database of grant and cooperative agreement awards. A query of that database in conjunction with a standard report from NOAA's GrantsOnline will provide e-mail addresses for all award recipients. EDA intends to email an electronic version of the survey to all such recipients.

### **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: live poll software
2. Will interviewers or facilitators be used? [ ] Yes [ X ] No

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

## **Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”**

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**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

**PURPOSE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation. If applicable, please provide any background information about this feedback request that may assist the reviewer in understanding the feedback effort (i.e., making an electronic version of a publication which has previously only had a paper version available to the public, etc.)

**DESCRIPTION OF RESPONDENTS:** Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program. The respondents described in this section should match up to the categories of respondents reported under the **Burden Hours** section.

**TYPE OF COLLECTION:** Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Provide answers to the questions.

**Gifts or Payments:** If you answer yes to the question, please describe the incentive and provide a justification for the amount.

### **BURDEN HOURS:**

**Category of Respondents:** Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected.

**No. of Respondents:** Provide an estimate of the Number of respondents.

**Participation Time:** Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

**Burden:** Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60. Another method to calculate the burden that is typically used in USPTO PRA submissions is to divide the participation time (which for these types of feedback requests typically is in minutes, such as 20, 15, 30 minutes) by 60. This results in a decimal number (20 minutes divided by 60 = 0.33 hours). This number is then multiplied by the number of responses.

**FEDERAL COST:** Provide an estimate of the annual cost to the Federal government. This estimate can be calculated in a number of ways. For surveys, customer comment cards/complaint forms, and usability testing (if a survey is used), this estimate is calculated by first determining the hourly rate and the estimated time that it takes USPTO personnel to

conduct/process the survey. The hourly rate is calculated by taking the GS rating/step and adding 30% to that rate to account for overhead and other costs. For example, if a GS-5, step 1 employee is conducting/processing the survey, the rate used would be \$21.23 (\$16.33 + \$4.90). Once the rate and estimated time is determined, the estimated cost is calculated by multiplying the number of responses received by the estimated time and then multiplying that amount by the rate.

In the case of focus or small discussion groups, the estimate is calculated by determining how many hours it will take to prepare for the group discussion, facilitate the group discussion, and then prepare reports/recommendations. The total time to complete these activities is then multiplied by the hourly rate for the personnel who are conducting the groups.

If the USPTO decides to contract the handling of the surveys, usability testing, focus groups, and discussion groups to outside vendors, then the total estimated cost to the USPTO for this work shown in the contract would be provided.

Please note, however, that the calculations do not need to be provided in the generic clearance request. Only the estimate of the annual cost to the USPTO needs to be provided.

**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.** Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment or describe the sampling plan and the customer list or other source used to define the universe of potential respondents. If the answer is no, then please provide a description of how the potential group of respondents will be identified and how they will be selected.

Please note that additional information must be provided whether “yes” or “no” is selected.

**Administration of the Instrument:** Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

If “Web-based or other forms of Social Media” or more than one option is selected, please provide a brief description of each option. For example, if “web-based or other forms of Social Media” is selected, then describe whether an electronic survey or some other form of electronic collection is being used, whether interactive software such as WebEx is being used so that participants in a focus or discussion group can attend the group remotely, etc. If more than one option is selected, then describe how the feedback collection is conducted using each option. Depending on the option, this can include information such as whether the survey is handed out to participants, whether the phone interviews and the paper surveys are the same, whether the paper and electronic surveys are the same, the number of focus groups and the estimated number of participants per group, etc.

If interviewers or facilitators will be used in focus or small discussion groups, please describe what their role will be in conducting the groups. Will they have topics already selected for the

group or will they guide the discussion? Will the interviewers/facilitators hand out a survey during the group? Will this survey be electronic or in paper? A script showing how the interviewer/facilitator is envisioned to conduct the focus and discussion groups, along with a list of possible questions to be asked during the discussion, can also be provided as an attachment to the generic clearance request.

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