Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 3145-0215)

TITLE OF INFORMATION COLLECTION: *Feedback on the EHR Core Research (ECR) 2020 Principal Investigator Meeting*

PURPOSE: *To provide feedback on the NSF Directorate for Education and Human Resources (EHR) Core Research (ECR) program's 2020 Virtual Investigator Meeting (taking place November 30-December 1, 2020). This feedback will be valuable both in assessing customer satisfaction with and the success of the 2020 meeting, and in planning for subsequent meetings with investigators on ECR awards.*

DESCRIPTION OF RESPONDENTS: *Individuals who attended the the ECR 2020 Virtual Investigator Meeting. These individuals will primarily be investigators (Principal Investigators and Co-Principal Investigators) with awards supported by the ECR program; other (non-investigator) individuals who participated in the meeting (e.g., invited speakers, NSF staff) will also be invited to complete the post-meeting survey.*

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 <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:＿＿Suzanne H. Plimpton, NSF Reports Clearance Officer＿＿＿＿＿＿＿＿＿＿＿＿＿＿＿

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 *Not applicable*

3. If Applicable, has a System or Records Notice been published? [ ] Yes [ ] No *Not applicable.*

Gifts or Payments:
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 respondents	Participation time per respondent	Total burden hours
Investigators (Principal and Co-Principal Investigators) who attended the ECR 2020 Virtual Investigator Meeting (NOTE: Number of respondents estimated based on registrations as of November 13, 2020)	325	6 minutes	(325*6)/60= 32.5 hours
Invited speakers who are not ECR investigators or NSF staff members	2	6 minutes	(2*6)/60= 0.2 hours
Totals	**327**	6 minutes	(*6)/60= **33 hours**

*It is estimated that approximately 25 NSF staff members will participate in the meeting. These NSF staff will also be invited to complete the post-meeting evaluation, but they are not included in this burden hour estimate.

FEDERAL COST: The estimated annual cost to the Federal government is $6441 *(based on labor hours quoted for task order supporting this work, including non-response follow-up and summarizing & delivering results)*

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?
        NSF will have a full listing of those registered who actually attended the ECR 2020 Virtual Investigator Meeting. This will constitute the census of individuals eligible to participate in the post-meeting survey. All of these individuals will be invited to participate in the survey.

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.

Instructions for completing Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback"

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.

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.

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.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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.

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.

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