## Request for Approval under the

**Generic Clearance for the “Conference, Meeting, Workshop, and**

**Poster Session Registration Generic Clearance (OD)”**

## (OMB#: 0925-0740, Expiration Date: 07/31/2022)

**TITLE OF INFORMATION COLLECTION:**

2020 Immunology and Immunotherapy Conference.

**PURPOSE:**

The purpose of this conference is to provide an opportunity for scientists from Center for Cancer Research, from other NCI divisions and other NIH Institutes, as well as from the extramural community (academia and biotech), to gather and exchange information about the latest developments in research pertaining to the immunotherapy of cancer. This conference has been held every three years since 2005 and has become one of the premier conferences in the field.

**DESCRIPTION OF RESPONDENTS**:

Scientists, physicians, fellows and students doing transnational and clinical work in immunotherapy at the NIH, and in academia and biotech.

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

[ x ] Abstract [ ] Application

[ x ] Registration Form [ ] 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.

Name:\_\_\_\_Julia Lam\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ x ] Yes [ ] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ x] Yes [ ] No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?

[ ] Yes [X ] No

**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 (Registration) | 1100 | 1 | 5/60 | 92 |
| Individuals (Abstract) | 60 | 1 | 5/60 | 5 |
| **Totals** |  | **1160** |  | **97** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **Total Burden Hours** | **Hourly Wage Rate\*** | **Total Burden Cost** |
| Individuals | 97 | $45.64 | $4427.08 |
| **Total** |  |  | **4428.08** |

\*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/2017/May/oes_nat.htm#00-0000>.

**FEDERAL COST:** The estimated annual cost to the Federal government is $\_\_\_\_\_\_\_\_2,328.18\_\_\_\_.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary\*\*** | **% of Effort** | **Fringe**  **(if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight** |  |  |  |  |  |
| Program Director | 14/5 | $132,818 | 1% |  | $1,328.18 |
| **Contractor Cost** |  |  |  |  | $1,000 |
| Travel |  |  |  |  | $ 0 |
| Other Cost |  |  |  |  | $ 0 |
| **Total** |  |  |  |  | **$2,328.18** |

\*\*\*\*The salary in the table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/19Tables/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 [ 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?

We plan to identify potential respondents through NIH Wide and NCI Wide announcements. We also contact a number of external Immunology groups and ask them to post the information regarding the conference on their websites under “events”.

**Administration of the Instrument**

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

Will interviewers or facilitators be used? [ ] Yes [ x ] No

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