## Request for Approval under the “Generic Clearance for Improving Customer Experience: OMB Circular A-11, Section 280 Implementation”

## (OMB Control Number: 0690-0035)

**TITLE OF INFORMATION COLLECTION:** Authenticated digital experience (formerly titled the “MyUSPTO.gov” survey)

**PURPOSE OF COLLECTION:**

USPTO wants to collect customer feedback on its authenticated offerings in order to identify strengths of and opportunities to improve the digital experiences of its customers. We currently ask users to register for myUSPTO.gov to enter the authenticated site but in the future there may be other authenticated offerings that may want to use this survey such as USPTO applicant information systems.

The feedback from this survey will be used by the USPTO to gain insights into customer behaviors and sentiments about core features and content, navigation, information browsing, and usability. This will also assist USPTO with identifying and implementing enhancements to USPTO customers’ digital experiences.

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

[ ] Customer Research (Interview, Focus Groups)

[X] Customer Feedback Survey

[ ] User Testing

**ACTIVITY DETAILS**

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

1. **Who will you collect the information from?**

USPTO wants to collect customer feedback from those individuals who use the authenticated digital offerings. This survey historically did not capture whether the respondent categorized themselves as part of a foreign government, U.S. government, non-profit, or private sector entity. Nor did it capture whether they are affiliated with a certain organizational type, size, or sector.

Over the past year, the authenticated login survey respondents categorized themselves as individuals within the following designations:

* Entrepreneur – 30%
* IP Professional: Paralegal – 19%
* Inventor – 19%
* IP Professional: Attorney – 17%
* Research Professional – 2%
* Engineer – 2%
* Vendor – 1%
* Student – 1%
* Other – 8%

Going forward with this updated version of the survey, we will be asking questions about the respondent’s role, business affiliation, sector, and geographic location.

1. **How will you ask a respondent to provide this information?**

As the USPTO customers navigate through the login process and enter the authenticated web environment, they are offered a web intercept survey. The survey pops up after they hit three web pages and invites them to provide feedback on their authenticated digital experience.

1. **What will the activity look like?**

When a customer agrees to participate in the survey, the survey pops up in a separate window and the customer is able to respond questions within that window. To complete the survey, they click “Submit”. When the survey is submitted, the customer sees a thank you message.

1. **Please provide your question list.**

See attached spreadsheet, “MyUSPTO Desktop Informational Updates.xlsx” for full question list with branching logic in the “Model Questions” and “Custom Questions” worksheets.

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

See attached spreadsheet, “MyUSPTO Desktop Informational Updates.xlsx” for instructions in the “Welcome and Thank You Text” worksheet.

1. **When will the activity happen?**

Surveys are offered to 40% of customers who browse [www.uspto.gov](http://www.uspto.gov) through the authenticated portal on an ongoing basis.

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

[ ] Yes [X] No

If Yes, describe:

**BURDEN HOURS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **Participation Time** | **Burden****Hours** |
| Customers who are invited and chose to participate | 7,071 | 4 min | 471 |
| **Totals** | **7,071** |  | **471** |

**CERTIFICATION:**

I certify the following to be true:

1. The collections are voluntary;
2. The collections are low-burden for respondents (based on considerations of total burden hours or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
3. The collections are non-controversial and do not raise issues of concern to other Federal agencies;
4. Any 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 near future;
5. Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
6. Information gathered is intended to be used for general service improvement and program management purposes; and,
7. Information gathered will only be shared publically in the manner described in the umbrella clearance of this control number.

Name: \_\_\_\_Chelsea D’Angona\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**All instruments used to collect information must include:**

**OMB Control No. 0690-0035**

**Expiration Date: 09/30/2023**

## HELP SHEET

## (OMB Control Number: 0690-0035)

**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.

**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:** Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

**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 per row.

**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.