

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp., date: 05/2021)**

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**TITLE OF INFORMATION COLLECTION:** Information Request from Visitors at the NIH Center for Scientific Reviews’ Information Booth (CSR)

**PURPOSE:**

As the NIH Center for Scientific Review (CSR) works to develop outreach materials to help NIH grant applicants better navigate the NIH peer review process, we are seeking to assess their general and specific needs. To this end, we are proposing to use a brief comment card for applicants seeking information from exhibit booths and we will operate at scientific conferences to determine general information needs. If they have specific questions and they desire a written response after the conference, we want to let them use the comment card to ask their questions.

The data on general needs collected would be used for internal use in developing outreach materials. Specific Q&As may be consolidated with staff experience in answering applicant questions and shared with the scientific community as FAQs in a qualitative manner and will not be generalizable to the population of study.

**DESCRIPTION OF RESPONDENTS:**

Respondents will be new and established researchers who are seeking information about NIH peer review by visiting our outreach booth at scientific conferences.

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

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Customer Comment Card/Complaint Form | <input 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.

Name: Hope Cummings

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
3. If Applicable, has a System or Records Notice been published? [ ] 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
Potential NIH Applicant	1000	1	2/60	33
<b>Totals</b>		1000		<b>33</b>

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
	33	36.62	\$1,208.46
<b>Totals</b>			<b>\$1,208.46</b>

\*The wage rate was obtained from [https://www.bls.gov/oes/2018/may/oes\\_nat.htm#19-0000](https://www.bls.gov/oes/2018/may/oes_nat.htm#19-0000)

**FEDERAL COST:** The estimated annual cost to the Federal government is \$1,523.51

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Scientific Review Officer	GS14/10	\$152,352	1%		\$1,523.51
<b>Contractor Cost</b>					N/A
Travel					N/A
Other Cost					N/A
<b>Total</b>					<b>\$1,523.51</b>

\*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2018/DCB.pdf>

**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?  
[ ] 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?

Respondents will be visitors seeking information from the CSR exhibit booth who choose to fill out a comment card.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)  
[ ] Web-based or other forms of Social Media  
[ ] Telephone  
[ **X** ] In-person  
[ ] Mail  
[ ] Other, Explain
2. Will interviewers or facilitators be used? [ ] Yes [ **X** ] No