

**Request for Approval under the “Generic Clearance for the Collection of
Routine Customer Feedback” (OMB#: 0925-0648 Exp., date: 03/2018)**

**TITLE OF INFORMATION COLLECTION: NIH Library Scholarly Publishing
Symposium**

PURPOSE:

The purpose of this information collection is to collect feedback from customers that have attended the Scholarly Publishing symposium. We will collect information about their satisfaction of the event. The information will be used to better the service delivery of NIH Library events.

DESCRIPTION OF RESPONDENTS:

The NIH Library serves NIH staff, fellow, trainees, contractors and other federal entities. This request is seeking clearance for non-federal employees (trainees, fellows, and contractors) that will attend the event.

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.

Name: Karla Bailey

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

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 | 100 | 1 | 3/60 | 5 |
| Totals | | 100 | | 5 |

| Category of Respondent | Total Burden Hours | Hourly Wage Rate* | Total Burden Cost |
|------------------------|--------------------|-------------------|-------------------|
| Individuals | 5 | \$24.34 | \$121.70 |
| Totals | | | \$121.70 |

*Bureau of Labor Statistics occupation title “All Occupations”, occupation code 00-0000, found at https://www.bls.gov/oes/current/oes_nat.htm#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is \$815.48.

| Staff | Grade/Step | Salary | % of Effort | Fringe (if applicable) | Total Cost to Gov't |
|--------------------------|------------|----------|-------------|------------------------|---------------------|
| Federal Oversight | | | | | |
| Biomedical Librarian | 12/1 | \$81,548 | 1% | | \$815.48 |
| Contractor Cost | | | | | \$0 |
| Travel | | | | | \$0 |
| Other Cost | | | | | \$0 |
| | | | | | \$0 |
| Total | | | | | \$815.48 |

*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2020/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? This request is seeking clearance for non-federal employees (trainees, fellows, and contractors) that will attend the event.

Administration of the Instrument

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