

**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:** BRAIN Explorer Feedback Survey

**PURPOSE:** The purpose of this survey is to receive feedback from the users of a web-based, interactive, educational experience called the BRAIN Explorer and their overall satisfaction with the web-based interactive program (e.g. topics covered, quality, enjoyment, etc.). These survey results will be used to inform the improvement of the BRAIN Explorer interactive experience.

**DESCRIPTION OF RESPONDENTS:** Respondents are users of the web-based interactive program, which can include, but are not limited to: high-school aged students, teachers, and other members of the public. It is a public webpage that anyone can access.

**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: Sophia Jeon, Ph.D. Health Science Policy Analyst, NINDS OSPP

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  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
Individual: BRAIN Explorer Users	1000	1	1/60	17
<b>Totals</b>		<b>1000</b>		<b>17</b>

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individual: BRAIN Explorer Users	17	\$25.72	\$437.24
<b>Totals</b>			<b>\$437.24</b>

\*Hourly wage rates for 00-0000 All Occupations avg is \$25.72 (based on [https://www.bls.gov/oes/current/oes\\_nat.htm#00-0000](https://www.bls.gov/oes/current/oes_nat.htm#00-0000)).

**FEDERAL COST:** The estimated annual cost to the Federal government is \$19,642.25.

Staff	Grade/Step	Salary	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight:</b>					
NINDS staff 1	14/4	\$126,049	5%		\$6302.45
NINDS staff 2	12/1	\$83,398	10%		\$8339.80
<b>Contractor Cost (optional):</b>					
NINDS staff 3		\$100,000	5%		\$5000.00
Travel (optional)					
Other Cost (optional)					
<b>Total</b>					<b>\$19,642.25</b>

### The selection of 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  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 will be distributing the web-based interactive experience for use during virtual educational events, such as the virtual US Science and Engineer Festival, public library programming, and to

an association of professional science teachers as potential supplemental material for their curriculum. The respondents could include students, teachers, facilitators/outreach organizers, and parents/guardians.

**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

Survey form

Chart Abstraction

Other, Explain

2. Will interviewers, facilitators, or research coordinators be used?  Yes  No