<u>Instructions</u> Signing Instructions



U.S. Department of State

REQUEST FOR APPROVAL UNDER THE "GENERIC CLEARANCE FOR THE COLLECTION OF ROUTINE CUSTOMER FEEDBACK" OMB CONTROL NUMBER: 1405-0193

Title of I	nformation Collection	Consular Services:	Imn	nigrant Vi	sa App	licant Satisfaction Survey		
Purpose	1							
related 450,000 specific	to processing of immigrant violations to immigrant visas per year. Teally appreciate feedback from	isas at approximately 200 cons o achieve good customer servi	ular ice an	sections o nd make a quality of	verseas ppropri our vis	ion with a number of operational issues c. CA currently processes approximately tate use of scarce resources, CA would a information, the accessibility of that insular personnel.		
	ends to use software to aggrege each post the views of local		ate th	ne identific	cation a	and analysis of global trends as well as		
Descript	ion of Respondents							
Respon minor v	dents are foreign nationals w					s may also be the parent or guardian of a itizen, Legal Permanent Resident, or		
Type of	Collection: (Check one)							
☐ Cu	stomer Comment Card/Complain	t Form	X	Customer	Satisfac	tion Survey		
Us	ability Testing (e.g., Web site or S	Software)		Small Disc	cussion (Group		
☐ Fo	cus Group			Other _				
Certifica	tion							
I certify the	he following to be true:							
1. Th								
2. Th								
3. Th	. The collection is non-controversial and does <u>not</u> raise issues of concern to other Federal agencies.							
4. Th	The results are <u>not</u> intended to be disseminated to the public.							
5. Inf	5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.							
	e collection is targeted to the solide program in the future.	citation of opinions from responden	nts wh	o have exp	erience	with the program or may have experience with		
Name (L	ast, First, MI)				Title			
	Barry	Catherine		M		Special Advisor, CA/EX		
Signer E	mail Address			eSigned Using	eForms	Date (mm-dd-yyyy) 06-25-2015		

TO ASSIST REVIEW, PLEASE PROVI	DE ANSWERS TO THE FO	LLOWING QUESTIONS.						
Personally Identifiable Information								
Is personally identifiable information (PII) collected?	1. Is personally identifiable information (PII) collected?							
a. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? Yes No								
2. If Applicable, has a System of 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?								
BURDEN HOURS								
Category of Respondent	Number of Respondents	Participation Time (Minutes)	Burden Hours					
Individuals or Households	10,000	3	500.00					
Totals	10,000	3	500.00					
FE	DERAL COST							
The estimated annual cost to the Federal government is		\$8,000.00						
IF YOU ARE CONDUCTING A FOO								
STATISTICAL METHODS, PROVIDE	E ANSWERS TO THE FOLI	LOWING 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? X 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.								
The survey would be provided to applicants who are applying for an immigrant visa. To complete an application, each applicant must personally visit a U.S. consular office overseas and be interviewed by a consular officer.								
CA would like to use survey software and electronic media as much as possible in order to survey customer satisfaction without putting a burden on scarce resources. Past surveys indicated that applicants are more likely to respond to a survey if they can do so while waiting for the required interview with a consular officer. In those offices located in countries where applicants are likely to have internet access whether through computers or smart phones, we will provide them the url or QR code for the survey when they appear in the waiting room. Applicants may thus take the survey while waiting, or they may do so later at their home or office. In our posts located in lesser developed countries, we would ask applicants to fill out a paper-based survey and drop it in a box before leaving the waiting room.								
CA will ask a selection among our immigrant visa processing posts to participate in the survey effort to help assess the utility of the survey methods. In CY 2015, we would only use the survey form in English. Among our high volume posts where English is common would be: Manila, Guangzhou, Mumbai, New Delhi, Kingston, Islamabad, Addis, & Accra. Based on FY2014 workload numbers, this could be a maximum number of respondents of 53,000 for the last quarter of CY 2015. As a minimum, we could ask these posts to make the survey available at least during 3 weeks of the last quarter of CY 2015. This would mean the minimum number of potential respondents could be approximately 15,000.								
In approximately one year, we will examine respondents' participation rate under different circumstances as well as try to identify global trends. We will then prepare a new sampling plan for immigrant visa applicants.								
Administration of the Instrument								
How will you collect the information? (Check all that apply)								
▼ Web-based or other forms of Social Media								
Telephone								
X In-person								
Mail Mail								
Other, Explain								
2. Will interviewers or facilitators be used? Yes No								
PLEASE MAKE SURE THAT ALL INSTRUMENTS INSTRUCTIONS AND SCRIPTS ARE SURMITTED WITH THE REQUEST								

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REQUEST FOR APPROVAL UNDER THE "GENERIC CLEARANCE FOR THE COLLECTION OF ROUTINE CUSTOMER FEEDBACK" OMB CONTROL NUMBER: 1405-0193 INSTRUCTIONS

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 xxxxx.)

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.

Description of Respondents: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

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: Provide answers to the questions.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

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.

Number 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 by the participation time, and then divide by 60.

Federal Cost: Provide an estimate of the annual cost to the Federal government.

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: Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g., for surveys) or facilitators (e.g., for focus groups) used.

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