## DOCUMENTATION FOR THE GENERIC CLEARANCE

**OF CUSTOMER SERVICE SATISFACTION COLLECTIONS**

# TITLE OF INFORMATION COLLECTION:

FSA Strategic Plan FY 2020-2024 Feedback Form

**[**x **] SURVEY [ ] FOCUS GROUP [ ] SOFTWARE USABILITY TESTING**

**DESCRIPTION OF THIS SPECIFIC COLLECTION**

Specify all relevant information, including

1. intended purpose: The Federal Student Aid (FSA)’s Five-Year Strategic Plan for Fiscal Years 2020–24 lays out ambitious goals and objectives to achieve our mission—Keeping the Promise: Funding America’s Future, One Student at a Time. Using stakeholders’ insights and input on the Strategic Plan, FSA can achieve our vision to be the most trusted and reliable source of student financial aid, information, and services in the nation.
2. need for the collection: Section 141 of the Higher Education Act of 1965, as amended, established the Department of Education’s Office of Federal Student Aid (FSA) as a Performance-Based Organization (PBO) for the delivery of student aid. The statute requires that FSA consult with students, institutions of higher education, Congress, lenders, the Advisory Committee on Student Financial Assistance and others with a vested interest in federal student aid in the development of FSA’s Five-Year Strategic Plan.
3. planned use of the data: FSA plans to incorporate relevant feedback from stakeholders to the strategic plan to improve our services to customers.
4. date(s) and location(s): 2/10/2020 to 3/9/2020, virtual
5. collection procedures: virtual including emails to stakeholders
6. number of focus groups, surveys, usability testing sessions: not applicable
7. description of respondents/participants: Schools, Students, Trade Associations, Media, U.S. Department of Education Employees

*State whether the data collection will be completed one time, will be collected on an annual basis, or other. Every 5 years*

*Attach a copy of the proposed collection instrument, e.g., survey questions, focus group script, usability testing plan. If a focus group also includes a survey, include both. Feedback form attached.*

**AMOUNT OF ANY PROPOSED STIPEND OR INCENTIVE**

N/A

**BURDEN HOUR COMPUTATION** *(Number of responses (X) estimated response or participation time in minutes (/60) = annual burden hours):*

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **Participation Time** | **Burden** |
| Schools | 10 | 15 | 3 |
| Students | 50 | 15 | 13 |
| Trade Associations | 50 | 15 | 13 |
| Media | 10 | 15 | 3 |
| US Department of Education employees | 50 | 15 | 13 |
| **Totals** | **170** | 75 | 45 |

**BURDEN COST COMPUTATION** *(this is only required when a stipend is being offered)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **Hourly** **Rate** | **Response Time** | **Total** |
| N/A |  |  |  |  |
|  |  |  |  |  |
| **Totals** |  |  |  |  |

**STATISTICAL INFORMATION**

***If statistical methods are to be used, fully describe the methodology, sample selection, expected response rates, and any other concepts needed to provide a full understanding of those methods.***

N/A

**REQUESTED APPROVAL DATE: 1/23/2020**

**NAME OF CONTACT PERSON: Wing Yeung**

**TELEPHONE NUMBER: 202-477-4128**

**MAILING LOCATION: 830 First St NE, Washington, DC 20002**

**ED DEPARTMENT, OFFICE: FSA**