

Request for Approval under the clearance of the “Generic Performance Progress Report” (OMB Control Number: 0970-0490)

TITLE OF INFORMATION COLLECTION: *Preschool Development Grant Birth through Five (PDG B-5) Renewal Grant Performance Progress Report*

PURPOSE:

The purpose of this Performance Progress Report is to help the Administration for Children and Families (ACF) assess the progress of the Preschool Development Grant Birth through Five (PDG B-5) renewal grantees. The PDG B-5 Renewal Grants seek to assist States in the coordination of their existing early childhood programs and services and funding streams in a mixed delivery model. This Performance Progress Report is tailored to the specific goals and objectives of the PDG B-5 Renewal Grants and will allow ACF to collect useful data from grantees in a uniform and systematic manner. ACF intends to analyze gathered data to provide a descriptive snapshot of grantees and assess progress over time. This Performance Progress Report will be collected annually and supplement the standard ACF required PPR (OMB #0970-0406), which will be collected with more frequency.

DESCRIPTION OF RESPONDENTS:

Information will be solicited from PDG B-5 Renewal Grantees (anticipated award December 2019). Eligible grantees include any State or Territory awarded a Fiscal Year 2018 PDG B-5 Initial Grant under funding opportunity number HHS-2018-ACF-OCC-TP-1379 or under PDG program that existed between 2014-2018. Currently, there are 47 states and territories eligible to apply for the PDG B-5 Renewal Grant.

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary and in compliance with HHS regulations.
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.

Name: Richard Gonzales, Project Manager-Preschool Development Grants Birth through Five (PDG B-5), Office of Child Care, Administration for Children and Families

To assist review, please provide answers to the following question:

PERSONALLY IDENTIFIABLE INFORMATION:

1. Is personally identifiable information (PII) collected? [] Yes [X] No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [] Yes [] No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [] Yes [] No

BURDEN HOURS

| Category of Respondent | No. of Respondents | No. of Responses per Respondent | Burden per Response | Annual Burden Hours |
|-------------------------------------|--------------------|---------------------------------|---------------------|---------------------|
| State, local, or tribal governments | 47 | 1 | 180 minutes | 141 hours |
| Totals | | | | 141 hours |

FEDERAL COST: The estimated annual cost to the Federal government is \$50,000.

TYPE OF COLLECTION: (Check one)

How will you collect the information? (Check all that apply)

Web-based

E-mail

Paper mail

Other, Explain:

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

Instructions for completing Request for Approval under the “Generic Performance Progress Report”

Program specific PPRs only need to be submitted to OMB for review and approval.

PPR instruments must display the required PRA information, i.e.,

OMB Control Number: 0970-0490; Expiration date: 1/31/2020 and the following statement:

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 3 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request.

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used.

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.

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. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

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 per row.

No. of Respondents: Provide an estimate of the Number of Respondents.

No. of Responses per Respondent: Provide the number of responses per respondent per year.

Burden per Response: Provide an estimate of the amount of time (in minutes) required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours.

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

TYPE OF COLLECTION: Check all that apply. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

Submit all instruments, instructions, and scripts with the request.