**Non-substantive Change Request   
OMB Control Number 0920-0765  
Fellowship Management System**

**Application Module**

**Host Site Module**

**Date Submitted: November 5, 2021**

This is a change request for the Centers for Disease Control and Prevention (CDC) Fellowship Management System (FMS). The web-based, flexible, and robust data management system allows CDC to electronically collect and process fellowship applications, host site assignment proposals, and fellowship alumni information from nonfederal persons. FMS also supports and monitors ongoing fellowship activities and compliance with fellowship requirements. Through Revisions and Change Requests, CDC has adapted the FMS to reflect changes in the demand for fellowship opportunities, to improve alignment and tailoring of questions for each fellowship program's eligibility criteria, and to clarify questions and instructions in response to user feedback. FMS consists of four modules**.** Each module has specialized functionality, and in the currently approved ICR for FMS (**OMB No. 0920-0765**), information collection occurs for multiple fellowships (see Table A).

In this Change Request, CDC seeks OMB approval to accommodate specific changes to only the Public Health Associate Program (PHAP) fellowship.

The proposed changes will contribute enhancements and provide the CDC with a more efficient and effective mechanism for collecting and monitoring fellowship information and ongoing fellowship activities, and compliance with fellowship requirements. In particular, these changes will help us streamline the assessment of applicants and better assess host sites during the selection process.

The specific changes include the following:

(1) Deletion of two questions from the Application Module that were deemed unnecessary to meet program objectives and (2) Addition of two questions to the Host Site Module to obtain more information about the position and workplace expectations.

The requested changes will not add any time to the FMS modules' entire burden. The approved FMS ICR burden time per response for each module is illustrated in [Table B](#_Table_B:_Estimated). The proposed changes do not substantively impact the burden because questions were both deleted and added. Moreover, the added questions require little to no additional time from respondents to answer.

The details of these changes are described below and depicted in Attachments C-F with screenshots:

1. (Application Module) **Attachment B** Application Module Screenshots
2. (Host Site Module) **Attachment C** Host-Site Module Screenshots

# **Table A: Affected CDC FMS Fellowships (change request highlighted in yellow)**

|  |
| --- |
| CDC Fellowships in FMS |

Epidemic Intelligence Service (EIS)

Epidemiology Elective Program (EEP)

CDC Steven M. Teutsch Prevention Effectiveness (PE) Fellowship

CDC E-learning Institute (ELI)

Future Leaders in Infectious and Global health Threats (FLIGHT)

Laboratory Leadership Service (LLS)

Population Health Training in Place Program (PH-TIPP)

Preventive Medicine Residency and Fellowship (PMR/F)

Public Health Associate Program (PHAP)

Public Health Informatics Fellowship Program (PHIFP)

Science Ambassador Fellowship (SAF)

# **Table B: Estimated Annualized Burden Hours**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Type of respondents | Form |  | Number of respondents | Frequency of Response | Average Burden per Response  (in hours) | Total Response Burden (in hours) |
| Fellowship applicants | FMS Application Module | Current Approval | 2,216 | 1 | 71/60 | 2,622 |
| Revision Request | 2,216 | 1 | 71/60 | 2,622 |
| Net Change | 0 | - | +0 minutes | +0 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Type of respondents | Form |  | Number of respondents | Frequency of Response | Average Burden per Response  (in hours) | Total Response Burden (in hours) |
| Public Health Agency or Organization Staff | FMS Host Site Module | Current Approval | 448 | 1 | 71/60 | 530 |
| Revision Request | 448 | 1 | 71/60 | 530 |
| Net Change | 0 | - | +0 minutes | +0 |

**New totals**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Type of respondents | Form |  | Number of respondents | Frequency of Response | Average Burden per Response | Total Response Burden (in hours) |
| Across all modules (not just the 2 above) | Across all modules (not just the 2 above) | Current Approval | 9708 | - | - | 5773 |
| Revision Request | 9708 | - | - | 5773 |
| Net Change | 0 | - | - | +0 |

# **Table C: Proposed Changes to the FMS Application Module**

**Attachment B – Application Module**

|  |  |  |  |
| --- | --- | --- | --- |
| **Program** | **Page/Section** | **Current Question/Item** | **Requested Change** |
|  | |
| PHAP | 11.1-a. Personal Statement Fields | 6. Understanding that there are different topical and geographical assignments, in which do you prefer to work and why? | **Change Option for PHAP to:**  No |  |
| PHAP | 11.1-a. Personal Statement Fields | 7. For re-applicants: When did you apply and what has changed since your last application? | **Change Option for PHAP to:**  No |  |

**Attachment C – Host Site Module**

|  |  |  |  |
| --- | --- | --- | --- |
| **Program** | **Page/Section** | **Current Question/Item** | **Requested Change** |
|  |
| PHAP | 6.14.2 Subject Area Proposed Assignment | No question pertaining to Health Equity | **New Question:**  Is health equity a component of this assignment focused on addressing health disparities?*(ex: serving rural populations, Indigenous and Native American persons, LGBTQ+ persons, persons with disabilities, racial and ethnic minority populations, and persons otherwise adversely affected by persistent poverty or inequality such as persons who are incarcerated, persons experiencing homelessness, etc.)* |  |
| PHAP | 6.14.2 Subject Area Proposed Assignment | Select the subject area the associate will be working in for the majority of the assignment: | **Change Option for PHAP to:**  Yes |  |
| PHAP | 6.14.4 Other Public Health Agency Details | No question pertaining to hours of operation. | **New Question:**  Please provide your normal business hours and expected scheduling? |  |