Request for Approval under the "Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)"
(OMB#: 0925-0740 Exp Date: 7/31/2022)

TITLE OF INFORMATION COLLECTION: Implementation Science Consortium in Cancer (ISCC) Registration Form

PURPOSE:

The National Cancer Institute (NCI) Division of Cancer Control and Population Sciences (DCCPS) hosts this Implementation Science Consortium in Cancer (ISCC) to foster the communication among implementation science stakeholders, identify and develop solutions, and promote collaborative projects to fill implementation science gaps. The 2020 ISCC will be a working meeting and feature a variety of presentations and discussion sessions to encourage more engagement and discussion during each virtual meeting.

Questions regarding race and gender are asked for tracking purposes only – these categories are not mandatory fields, as indicated on the application form.

DESCRIPTION OF RESPONDENTS:
Scientists, Researchers, PIs, postdocs and academic

TYPE OF COLLECTION: (Check all that apply)

[ ] Abstract   [ ] Application
[X] Registration Form   [ ] 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 <u>not</u> raise issues of concern to other federal agencies.

Name: Sarah Bernal

To assist review, please provide answers to the following question:
Personally Identifiable Information:
1. Is personally identifiable information (PII) collected? [X] Yes [ ] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?   [X] Yes [] No

Gifts or Payments:
Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [X] No

Amount: _____

Explanation for incentive: (include number of visits, etc.)

ESTIMATED BURDEN HOURS and COSTS

Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Individuals	500	1	5/60	42
Totals		**500**		**42**

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	42	$46.95	$1,971.90
Total			**$1,971.90**

*Source of the mean Hourly Wage Rate is provided by the Bureau of Labor Statistics, Occupation title "Medical Scientists" 19-1040, https://www.bls.gov/oes/2019/May/oes_nat.htm#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is $6,360.97.

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Director	14/5	$137,491	1%		$1,374.91
Communications Manager	10/5	$74,303	2%		$1,486.06
Contractor Cost					$3,500
Travel					$0
Other Cost					$0
Total					**$6,360.97**

**The salary in the table above is cited from
https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/20Tables/html/DCB.aspx

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
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?

This training program is advertised through the Implementation Science listserv.

Administration of the Instrument
How will you collect the information? (Check all that apply)
[X] Web-based or other forms of Social Media
[ ] Telephone
[ ] In-person
[ ] Mail
[ ] Survey Form
[ ] Chart Abstraction
[ ] Other, Explain

Will interviewers or facilitators be used? [ ] Yes [X] No

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