

**Request for Approval under the Generic Clearance for the “Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)” (OMB#: 0925-0740, Expiration Date: 07/31/2022)**

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**TITLE OF INFORMATION COLLECTION:** John Milner Nutrition and Cancer Prevention Research Practicum

**PURPOSE:**

The information collected is for the purpose of registering participants for this NIH three-day, virtual educational conference (March 9 – 11, 2021) that will provide specialized instruction in the role of diet and bioactive food components as modifiers of cancer incidence and tumor behavior.

Participants of this practicum will:

- Learn pertinent pre-clinical and clinical studies related to bioactive food components, cancer prevention and survivorship;
- Identify the impact of cutting edge research on cancer prevention, including topics such as the microbiome, nutrigenomics, and bioenergetics ;and
- Acquire additional skills to formulate research ideas and communicate effectively

**DESCRIPTION OF RESPONDENTS:**

The target audience includes but is not limited to Registered Dietitian Nutritionists, Nutrition Scientists, Medical Doctors, Nurses, or any health care providers or individuals with a sustained commitment to nutrition and health promotion.

**TYPE OF COLLECTION:** (Check all that apply)

- Abstract  Application  
 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 not raise issues of concern to other federal agencies.

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

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected?  Yes  No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  Yes  No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

Amount: \_\_\_N/A\_\_\_\_\_

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
<b>Totals</b>		<b>500</b>		<b>42</b>

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	42	\$32.17	\$1,351.14
<b>Total</b>			<b>\$1,351.14</b>

\* Source of the mean Hourly Wage Rate average is provided by the Bureau of Labor Statistics, Occupation title Dietitian and Nutritionist (29-1031), <https://www.bls.gov/ooh/healthcare/dietitians-and-nutritionists.htm> (\$29.46); and Agricultural and Food Scientist (19-1010), <https://www.bls.gov/ooh/life-physical-and-social-science/agricultural-and-food-scientists.htm> (\$34.88)

**FEDERAL COST:** The estimated annual cost to the Federal government is \$6,581.00.

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Nutritionist	13/8	\$126,620	5%		\$6,331.00
<b>Contractor Cost</b>					\$0
Travel					\$0
Other Cost					\$250
<b>Total</b>					<b>\$6,581.00</b>

\*\*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>

**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?  
 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?

We are announcing the meeting via the NCI website for our division, Division of Cancer Prevention, and our research group, Nutritional Science Research Group. We are announcing on the NUTRITIONCANCER listserv and other social media outlets for individuals interested in nutrition and cancer.

### **Administration of the Instrument**

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

- Web-based or other forms of Social Media  
 Telephone  
 In-person  
 Mail  
 Survey Form  
 Chart Abstraction  
 Other, Explain

Will interviewers, facilitators, or research coordinators be used?  Yes  No

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