## 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)

**TITLE OF INFORMATION COLLECTION:** 2021 **C**o-Clinical **I**maging Research **R**esource **P**rogram (CIRP) Annual Virtual Meeting (NCI)

**PURPOSE:**

The Division of Cancer Treatment and Diagnosis (DCTD) of the National Cancer Institute (NCI) will host the 2021 ***Co-clinical Imaging Research Resource Program (CIRP) Annual Virtual Meeting*** on June 16-17***.*** CIRP **network was launched in 2018 as a trans-NCI initiative, joined by Cancer Imaging Program at Division of Cancer Treatment and Diagnosis, Division of Cancer Biology, and Division of Cancer Prevention.** This annual virtual meeting is organized to enhance direct dialogues between NCI, the network investigators, the investigators from cancer biology community, cancer imaging community and clinicians, with focus on identifying major challenges and developing consensus on the strategies to overcome the challenges.

**DESCRIPTION OF RESPONDENTS**:

All CIRP teams members and associate members, NCI other extralmural program staff, investigators from cancer or imaging communities who are interested in this progam, other federal agencies and/or NIH other institutes extramual program staff. It is estimated ~ 160 total attendees, with ~ 20 FTEs.

**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 not raise issues of concern to other federal agencies.

Name: Huiming Zhang, PhD

**To assist review, please provide answers to the following question:** If you are collecting name and email, then check yes for PII.

**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? [ ] Yes [ X ] 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 BurdenHours |
| Individuals | 140 | 1 | 5/60 | 12 |
| **Totals** |  | **140** |  | **12** |

|  |  |  |  |
| --- | --- | --- | --- |
| Category of Respondent | Total BurdenHours | Hourly Wage Rate\* | Total Burden Cost |
| Individuals | 12 | $46.95 | $563.40 |
| **Total** |  |  | **$563.40** |

\*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 $155.20.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary\*\*** | **% of Effort** | **Fringe** **(if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight** |  |  |  |  |  |
|  Program Director | 14/9 | $155,202 | 1% |  | $155.20 |
| **Contractor Cost** |  |  |  |  | $0 |
| Travel |  |  |  |  | $0 |
| Other Cost |  |  |  |  | $0 |
| **Total** |  |  |  |  | **$155.20** |

\*\*The salary in the table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/21Tables/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 espondents and do you have a sampling plan for selecting from this universe? [ ] Yes [ X] 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?

The CIRP network teams and associate members are required to attend, and the meting news will be posted on NCIP Hub, and NCI Event and some scientific meetings.

**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, facilitators, or research coordinators be used? [ ] Yes [X ] No

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