

Request for Approval under the “Conference, Meeting, Workshop, and Poster Session Registration Generic Clearance (OD)”

(OMB#: 0925-0740 Exp Date: 07/2022)

TITLE OF INFORMATION COLLECTION: Neurologic and Psychiatric Effects of SARS-CoV-2 Infection Meeting Registration

PURPOSE:

Collect preliminary information from participants of National Institute of Mental Health (Division of AIDS Research), National Institute of Neurological Disorders and Stroke and National Institute on Aging’s virtual meeting entitled, “Neurologic and Psychiatric Effects of SARS-CoV-2 Infection.”

DESCRIPTION OF RESPONDENTS:

The workshop aims to bring together researchers, and members of the public interested in examining emerging data related to neurologic and psychiatric complications of SARS-CoV-2 infection and possible interactions with other central nervous system infections such as HIV.

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

Abstract
 Registration Form

Application
 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: Mary Lou Prince, NIMH

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: _____

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/Households	500	1	1/60	8
Totals		500		8

Category of Respondent	Total Burden Hours	Wage Rate*	Total Burden Cost
Individuals/Households	8	\$44.31/hr	\$354
Totals			\$354

* Private sector and government respondent wage rate data is from the Life Scientists, All Other (19-1099) category at http://www.bls.gov/oes/current/oes_nat.htm#00-0000.

FEDERAL COST: The estimated annual cost to the Federal government is \$376.

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Analyst	GS-13/S 10	\$134,798	0.05%		\$67
Contractor Cost		N/A	N/A		\$309
Travel					
Other Cost					
					\$376

*the Salary in table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2021/DCB.pdf>.

The selection of 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 will send an email announcement about the conference (with registration link) to NIMH listservs of employees and public partners, and encourage them to forward as

well. The workshop is open to the public so anyone who completes the registration form will be able to attend and view the workshop via webcast.

Administration of the Instrument

1. 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

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

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