

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

TITLE OF INFORMATION COLLECTION: The 10th Annual Global Cancer Research Symposium Registration (NCI)

PURPOSE:

The 10th Annual Symposium on Global Cancer Research will be held virtually March 23, 2022 – March 24, 2022 as a satellite meeting to the [13th Annual Consortium of Universities for Global Health \(CUGH\) Global Health Conference](#). The Symposium is organized through a collaboration with the US National Cancer Institute Center for Global Health, CUGH, USC Norris Comprehensive Cancer Center, UCLA Jonsson Comprehensive Cancer Center, City of Hope Comprehensive Cancer Center, University Teaching Hospital, Ministry of Health, Republic of Zambia, Partners in Hope, Lilongwe, Malawi, Fundación Instituto Leloir-CONICET, Buenos Aires, Argentina, the American Society of Clinical Oncology (ASCO), and the American Association for Cancer Research (AACR). The objectives of this virtual Symposium are to: (1) provide a venue for the global oncology research community to exchange information to identify potential areas for collaboration; (2) develop strategic priorities for advancing the field of global oncology; and (3) share initiatives that are reducing the burden of cancer in low resource settings.

DESCRIPTION OF RESPONDENTS:

NIH Scientists, NIH-funded Researchers, PIs, NCI Designated Cancer Centers, academic institutions, students, and researchers from low- and middle-income countries.

TYPE OF COLLECTION: (Check one)

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: Mishka Cira

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 (ASGCR Registration)	300	1	3/60	15
Totals		300		15

COST TO RESPONDENT

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Individuals	15	\$48.45	\$726.75
Total			\$726.25

*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/2020/May/oes_nat.htm#00-000

FEDERAL COST: The estimated annual cost to the Federal government is **\$5,875.80**

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
Federal Oversight					
Program Director	13/5	117,516	5%		\$5,875.80
Contractor Cost					\$0
Travel					\$0
Other Cost					\$0
Total					\$5,875.80

**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>

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? 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 meeting will be advertised through NIH/NCI Center for Global Health listservs, social media, and scientific steering committee members.

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.