

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 0970-0401)

TITLE OF INFORMATION COLLECTION: Administration for Children & Families Learning Exchange: Optimizing the Use of American Rescue Plan Act Funds Post-Survey.

PURPOSE: The Administration for Children and Families (ACF) would like to learn more about attendees’ experiences at the ACF Learning Exchange: Optimizing the Use of American Rescue Plan Act Funds where they will watch short grantee presentations and an ACF moderated grantee panel discussion. Attendees will also participate in small group, interactive breakout sessions where they will have an opportunity to brainstorm, problem-solve, and discuss ideas for how to use American Rescue Plan Act (ARP) funds to strategically help their communities and reduce systemic inequities. ACF will use the information collected to understand attendees’ experiences at this event and to improve future events hosted by ACF.

DESCRIPTION OF RESPONDENTS: Grantees at the state and county commissioner-level throughout the United States who have received ARP funding and are registered for the ACF Learning Exchange.

TYPE OF COLLECTION:

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> 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.
4. The primary purpose of the results is not for public dissemination.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name and affiliation: Natasha Wright, ACF Immediate Office of the Assistant Secretary (IOAS)

To assist review, please provide answers to the following questions:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? Yes No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? Yes No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? Yes No

Gifts or Payments:

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

BURDEN HOURS

| Information Collection | No. of Respondents | No. of Responses per Respondent | Estimated Time per Response | Burden Hours |
|--|---------------------------|--|------------------------------------|---------------------|
| ACF Learning Exchange: Optimizing the Use of ARP Funds Post Survey | 300 | 1 | 0.067 hours (4 minutes) | 20 |
| Totals | 300 | 1 | 0.067 hours | 20 |

FEDERAL COST: The estimated annual cost to the federal government is \$440

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

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?
[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?’

IOAS defines the number of potential respondents as registrants of the ACF Learning Exchange: Optimizing Use of ARP Funds. The survey will be deployed after (Post Survey) the virtual event to all registrants.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
 - [X] Web-based or other forms of Social Media
 - [] Telephone
 - [] In-person
 - [] Mail
 - [] Other, Explain
2. Will interviewers or facilitators be used? [] Yes [X] No

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

