

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

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**TITLE OF INFORMATION COLLECTION:** Child Care Policy Research Partnership Community of Practice - Year 2 Participant Feedback

**PURPOSE:** The purpose of this voluntary information collection is to solicit feedback from participants in the Child Care Policy Research Partnership monthly virtual web meetings. These meetings are held as part of an ongoing Community of Practice. This feedback will help the government understand the grantees’ experiences and preferences and will be used to improve future Community of Practice sessions.

**DESCRIPTION OF RESPONDENTS:** Respondents will be representatives from the states and research organizations with OPRE Child Care Policy Research Partnership who attend monthly virtual web meetings as part of a Community of Practice.

**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: Sarah Blankenship, Child Care Program Specialist, ACF Office of Planning, Research, and Evaluation

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  No

**BURDEN HOURS**

<b>Information Collection</b>	<b>Category of Respondent</b>	<b>No. of Respondents</b>	<b>No. of Responses per Respondent</b>	<b>Estimated Time per Response</b>	<b>Burden Hours</b>
Webinar poll	State/Territory Child Care Policy Research Partnership Team Members (State, local, or tribal government)	11	1	8 minutes	1.5 hours
Webinar poll	State/Territory Child Care Policy Research Partnership Project Team Members (Private sector)	30	1	8 minutes	4 hours
<b>Totals</b>		<b>41</b>	<b>1</b>	<b>8 minutes</b>	<b>5.5 hours</b>

**FEDERAL COST:** The estimated annual cost to the Federal government is   \$1500  

**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?  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?

The universe of potential respondents is the list of state and research organization project team members who are in attendance at the monthly web meeting at which the poll is held. We will survey the full universe so do not have a sampling plan.

**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
  - Other, Explain
2. Will interviewers or facilitators be used?  Yes  No

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