

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

**TITLE OF INFORMATION COLLECTION:** Adolescent Pregnancy Prevention (APP) Program Grantee Conference Planning Committee Feedback

**PURPOSE:** The purpose of the activity is to collect feedback from grantees that will inform planning for the 2022 Adolescent Pregnancy Prevention (APP) Grantee Conference. The feedback we receive from grantees will provide essential information that is critical to plan a conference that meets the training needs and expectations of the grantees.

The questions provide an expeditious format to gather specific information from grantees during conference-planning meeting calls. We plan to hold four planning sessions with grantees. One session will focus on the conference theme, structure, and networking, two will focus on feedback related to visual design and one will focus on feedback related to engaging youth and grantees as well as general feedback related to the overall conference experience. This information will be used to plan various aspects of the conference.

**DESCRIPTION OF RESPONDENTS:** Respondents include up to 14 grantee staff who represent State Personal Responsibility Education Program (PREP), Competitive PREP, Tribal PREP, PREP Innovative Strategies (PREIS), Sexual Risk Avoidance (SRAE), Title V Competitive SRAE and Title V State SRAE grantees with projects administered by the APP Program.

**TYPE OF COLLECTION:** (Check one)

- |  |   |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input type="checkbox"/> Customer Satisfaction Survey                           |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input checked="" type="checkbox"/> Small Discussion Group                      |
| <input type="checkbox"/> Focus Group                                   | <input checked="" type="checkbox"/> Other: <u>MURAL (a whiteboard software)</u> |

**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 results are not intended to be disseminated to the public.
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: LeBretia White, Program Manager, Family and Youth Services Bureau

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, will any information that is collected be included in records that are subject to the Privacy Act of 1974?  Yes  No **Not applicable**
3. If Yes, has an up-to-date System of Records Notice (SORN) been published?  Yes  No **Not applicable**

**Gifts or Payments:**

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

**BURDEN HOURS**

Grantees will take part in four planning sessions. Each session will cover a specific topic, as described above.

Category of Respondent	Type of Collection	Expected No. of Respondents	No. of Responses	Hours per Response	Total Hours
Grantees (Private Sector)	Virtual poll or whiteboard, small group discussion	14	4	1.5	84

**FEDERAL COST:** The estimated cost to the Federal government is \$5,000

Item/Activity	Details	\$ Amount
FYSB oversight of contractor and project	1% of FTE: GS-13 Program Specialist	\$1,000
Deployment of survey instrument, reminders to grantees for completion, analysis of results (Contractor)	Labor hours (0.75% of FTE for contractor staff)	\$4,000
<b>Total</b>		<b>\$5,000</b>

**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?**

All grantees are eligible to apply for and participate on the Grantee Planning Committee. From the applications, a group of approximately 14 grantee staff persons will be selected and are

expected to participate in the planning meetings. Structured questions will be posed at the planning meetings (see Attachment A).

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)

Web-based

Telephone

In-person

Mail

Other, Explain – using MURAL (a whiteboard software) and via a video conference call.

2. Will interviewers or facilitators be used?  Yes  No

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

The questions to be asked during the meeting are included as Attachment A.