

**Request for Approval under the “Conference, Meeting, Workshop,  
Registration and Challenges Generic Clearance (OD)”  
(OMB#: 0925-0740, Exp Date: 09/30/2025)**

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**TITLE OF INFORMATION COLLECTION:** NCI’s FFRDC Pre-Proposal Conference (NCI)

**PURPOSE:** The NCI is virtually hosting the "NCI’s FFRDC Pre-Proposal Conference," on October 20, 2022. The conference is designed for contractors to obtain a better understanding of the work required.” Offerors are encouraged to submit all questions in writing before the conference. Questions will be considered at any time before or during the conference; however, offerors will be asked to confirm verbal questions in writing. After the conference, an amendment to the solicitation containing an abstract of the questions, the Government’s answers, and a list of attendees will be made publicly available.

**DESCRIPTION OF RESPONDENTS:** The NCI anticipates non-Government attendees interested in the re-competition of the NCI FFRDC. Private Sector (for profit or not-for-profit)

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

- |   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> Abstract                     | <input type="checkbox"/> Application  |
| <input type="checkbox"/> Challenges and Competition   |                                       |
| <input checked="" type="checkbox"/> Registration Form | <input type="checkbox"/> Other: _____ |

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is a low burden for respondents and a low cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.

Name: Donald Mills

To assist review, please answer the following question: If you are collecting name and emails, check yes for PII.

**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 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: \_\_N/A\_\_

The explanation for incentive: (include the 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
Private Sector (for profit or not-for-profit)	100	1	5/60	8
<b>Totals</b>		<b>100</b>		<b>8</b>

**COST TO RESPONDENT**

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Private Sector (for profit or not-for-profit)	8	\$28.01	\$224.08
<b>Total</b>			<b>\$224.08</b>

\*The Bureau of Labor Statistics provides the mean Hourly Wage Rate, Occupation title “All Occupations” 00-0000, [https://www.bls.gov/oes/current/oes\\_nat.htm](https://www.bls.gov/oes/current/oes_nat.htm).

**FEDERAL COST:** The estimated annual cost to the Federal government is \$ 928.29

Staff	Grade/Step	Salary**	% of Effort	Fringe (if applicable)	Total Cost to Gov't
<b>Federal Oversight</b>					
Contract Specialist	12/2	\$92,829	1%		\$928.29
<b>Contractor Cost</b>					\$0
Travel					\$0
Other Cost					\$0
<b>Total</b>					<b>\$928.29</b>

\*\*The salary in the table above is cited from <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/22Tables/html/DCB.aspx>

## **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 describe how you plan to identify your potential group of respondents and how you will select them.

The Pre-Proposal Conference will be publicized on [www.sam.gov](http://www.sam.gov).

## **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 ensure that all instruments, instructions, and scripts are submitted with the request.**