## Request for Approval under the “Conference, Meeting, Workshop, Registration and Challenges Generic Clearance (OD)”

## (OMB#: 0925-0740, Expiration Date: 09/30/2025)

**TITLE OF INFORMATION COLLECTION:** GI SPOREs Investigator Meeting (NCI)

**PURPOSE:** The primary goal of the GI SPOREs Investigator Meeting being held virtually on November 14-15, 2022, is to identify new collaborative opportunities in the prevention and treatment of GI/Pancreatic/ NET malignancies.

The meeting will facilitate a breakout session that will focus on collaborative interactions in four specific areas, including cancer immunology, tumor metabolism, precursor lesions, early detection and interception, and precision therapy.

**DESCRIPTION OF RESPONDENTS**: NCI awardees of the Specialized Program of Research Excellence (SPORE) grants. Specifically, Directors of GI/Pancreatic/NET SPORE grants.

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

[✓ ] Abstract [ ] Application

[ ] Challenges and Competition

[ ✓ ] Registration Form [ ] 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: Shamia (Mia) Garrett

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**To assist review, please answer the following question: If you collect names 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: \_\_\_\_\_\_\_\_\_

The explanation for incentive: (include the number of visits, etc.)

**ESTIMATED BURDEN HOURS and COSTS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Form Name** | **Category of Respondent** | **No. of Respondents** | **No. of Responses per Respondent** | **Time per Response****(in hours)** | **Total Burden****Hours** |
| Registration | Private sector | 100 | 1 | 5/60 | 8 |
| Abstract | Private sector | 25 | 1 | 5/60 | 2 |
| **Totals** |  |  | **125** |  | **10** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **Total Burden****Hours** | **Hourly Wage Rate\*** | **Total Burden Cost** |
| Private sector | 10 | $49.44 | $494.40 |
| **Total** |  |  | **$494.40** |

\*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/2021/May/oes_nat.htm#19-1040>.

**FEDERAL COST:** The estimated annual cost to the Federal government is $3,551.05.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary\*\*** | **% of Effort** | **Fringe** **(if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight** |  |  |  |  |  |
| Program Analyst | 12/5 | $101,813 | .02% |  | $2,036.26 |
| Policy Analyst | 14/7 | $151,479 | .01% |  | $1,514.79 |
| **Contractor Cost** |  |  |  |  | $0 |
| Travel |  |  |  |  | $0 |
| Other Cost |  |  |  |  | $0 |
| **Total** |  |  |  |  | **$3,551.05** |

\*\*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>

**NOTE:** Contractors and Fellows are calculated in Total cost; there is no need to estimate wage rate and percentage of the time.

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

Awarded grantees of the Specialized Programs of Research Excellence (SPOREs)

**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.**