

**Request for Approval under the “Generic Clearance for NIH Citizen  
Science and Crowdsourcing Projects”**

**(OMB#: 0925-0766 Exp., date: 04/2023)**

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**TITLE OF INFORMATION COLLECTION: Nomination to Serve on Advisory and Peer Review Activities for the National Institute of General Medical Sciences (NIGMS)**

**PURPOSE:**

NIGMS seeks self-nomination of individuals with appropriate expertise to participate on advisory and peer review activities including Special Emphasis Panels. The purpose is to collect information for agency internal use to improve scientific practices and/or assist in scientific reviews.

**DESCRIPTION OF RESPONDENTS:**

The respondents may be persons from academia, industry, other governmental organizations, nongovernmental organizations, public

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

- |  |   |
|--|---|
| <input type="checkbox"/> Data Catalogue                          | <input type="checkbox"/> Repository of Tools and Best Practices |
| <input type="checkbox"/> Recommendations of scientific reviewers | <input type="checkbox"/> Resources                              |
| <input checked="" type="checkbox"/> Call for Nominations         | <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. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
5. 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: Stephanie Constant, Ph.D.

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, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  Yes  No
3. If Applicable, has a System or Records Notice 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

**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	100	1	6/60	10
<b>Total</b>		100		10

**COST TO RESPONDENT**

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
Private Sector	10	\$45.82	\$458.20
<b>TOTAL</b>			\$458.20

\*\* <https://www.bls.gov/ooh/life-physical-and-social-science/medical-scientists.htm>;  
<https://www.bls.gov/oes/current/oes251053.htm>

**FEDERAL COST:** The estimated annual cost to the Federal government is \$14,777.36

Staff	Grade/ Step	Salary*	% of Effort	Fringe (if applicable )	Total Cost to Gov't
<b>Federal Oversight</b>					
IT Project Manager	13/10	\$138,868	2%		\$2,777.36
<b>Contractor Cost</b>					
SharePoint Administrator	N/A	N/A			\$4,000
SharePoint Developer	N/A	N/A			\$3,000
Business Analyst	N/A	N/A			\$1,000
Security Analyst	N/A	N/A			\$4,000
<b>Travel</b>					
<b>Other Cost</b>					
<b>Total</b>					\$14,777.36

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

**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 [X] 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?

**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