

NIST
CHIPS.GOV

Thank you for your interest in CHIPS for America. To request a meeting with a CHIPS staff member or an appearance at an event, please complete this form.

FORM CHIPS-0001-000
Expiration Date: 12/31/2025

Requester Information

Your name: [Text Field] Your title: [Text Field]
 Business Email: [Text Field] Business Phone Number: [Text Field]
 Business Organization: [Text Field] Do you currently work for the Department of Commerce? [Dropdown: Yes]

Contact Information

Internal contact for name (if different from request): [Text Field] Internal contact for name (if different from request): [Text Field]
 External contact business email (if different from request): [Text Field] External Contact Organization (Business): [Text Field]

Information About this Request

Type of request: [Dropdown: Other] Title of event or meeting: [Text Field]
 Will it be a virtual event? [Dropdown: Other] Will it be a virtual or hybrid? [Dropdown: Other]
 What is the purpose of this request? [Text Area] Requested meeting time: [Text Field]
 How would it best be used? [Dropdown: Other] Requested Number: [Text Field] Additional Number Information: [Text Field]
 Public and Confidential: [Dropdown: Other] Length of speaking time (in minutes): [Text Field]
 Will other staff be there? [Dropdown: Other] Will other staff be there? [Dropdown: Other]
 Will you be present? [Dropdown: Other] Please provide the number of anticipated attendees: [Text Field]
 Other notes or comments: [Text Area]

Disclosures, etc... Section

A Federal Agency may not collect or sponsor, and a person is not required to respond to, an online survey or request to a privacy or other information collection subject to the requirements of the Paperwork Reduction Project of 1997 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 1565-0002. Without this approval, we will not conduct this information collection. Public reporting for this information collection is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and reviewing and reporting the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to: info@chips.gov.

NOTE: While NIST will take reasonable precautions to protect any information submitted, NIST considers the request information to be exempt. By submitting the information, you consent to the collection of any data associated with information with electronic submissions. If you wish to review a file, the government will provide the request information.

NIST NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY
 100 Bureau Drive
 Gaithersburg, MD 20899
 301-975-3000
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 Information Quality Standards | [Commerce.gov](#) | [Science.gov](#) | [USA.gov](#) | [Vulnerability](#)

This side is showing the full form in its entirety for a non-DOC user. A user would have to zoom out to see the form like this. The following slides will break this form down and show each section as the user will see them at a normal scale. The first set of slides will flow through the fields for a non-DOC user. The second set will flow through the screens for a DOC user.

Requestor Information Section

Contact Information Section

Information About this Request Section

Information About this Request Section [continued]

Disclosures, etc... Section

Non-Dept of Commerce User

Requestor Information Section for a non-DOC user

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Thank you for your interest in CHIPS for America. To request a meeting with a CHIPS staff member, or an appearance at an event, please complete this form.

OMB Control #0693-XXX

Expiration Date: XX/XX/XXXX

Requestor Information

* First name

* Last name

* Business Email

* Business Phone number

* Business Organization

* Do you currently work for the Department of Commerce?

As soon as we can, we will include an icon called a "Tool Tip" that when the user puts their mouse over the icon a pop-up window (small) is displayed that will state something like, "Mis-representation of your status will result in the request being rejected".

Values: Yes/No

Contact Information Section for a non-DOC user

Contact Information

External contact first name (if different from requestor)

External contact last name (if different from requestor)

External contact business email (if different from requestor)

External Contact Organization (Business)

Information about this request Section for a non-DOC user
(is the same for a DOC user)

Information about this request

* Type of request
--Select--
Drop Down Values: Announcement, Briefing, Event, Fireside Chat, Interview, Keynote, Meeting, Panel, Roundtable, Webinar

* Title of event or meeting

* Who is the event host?

* Will the event be onsite or virtual?
Onsite
Drop Down Values: Onsite, Virtual

Please provide the city of the event or meeting
Field only appears if answer to "Will the event be onsite or virtual?" is Onsite

* Please provide the state of the event or meeting
--Select--
Field only appears if answer to "Will the event be onsite or virtual?" is Onsite
Drop Down Values: [2 letter codes for all US states]

* What is the purpose of this request?

* Expected discussion topics

Please select if there will be a CHIPS or DOC speaking role
Yes
Drop Down Values: Yes, No

Requested Speaker
--Select--
Field only appears if answer to "Please select if there will be a CHIPS or DOC speaking role" is "Yes".
Drop Down Values:
Secretary of Commerce - Gina Raimondo
Deputy Secretary - Don Graves
Under Secretary of Commerce/Director of NIST - Laurie Locascio
CHIPS Program Office Director - Michael Schmidt
CHIPS R&D Office Director
NSTC Director
CHIPS R&D Metrology Director
Other

Additional Speaker Information
Field only appears if answer to "Please select if there will be a CHIPS or DOC speaking role" is "Yes".

Information About this Request Section [continued] for a non-DOC user
(is the same for a DOC user)

Preferred date/time

*Date

*Time

Length of speaking time (in minutes)

1st alternative date/time

Date

Time

2nd alternative date/time

Date

Time

*Will press be present?

Drop Down Values:
Yes
No

Please provide the number of anticipated attendees

Field only appears if answer to "Will press be present?" is Yes

* If this request is for a meeting. If you anticipate that VIPS will attend, please provide names and titles

Disclosures for a non-DOC user (is the same for a DOC user)

Submit

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PRIVACY ACT NOTICE

The collection, maintenance, and disclosure of this information is governed by the Privacy Act of 1974 (5 U.S.C. § 552a).

Authority: The CHIPS Incentives Program is authorized by Title XCIX—Creating Helpful Incentives to Produce Semiconductors for America of the William M. (Mac) Thornberry National Defense Authorization Act for Fiscal Year 2021 (Pub. L. 116-283, referred to as the CHIPS Act or Act), as amended by the CHIPS Act of 2022 (Division A of Pub. L. 117-167).

Purpose: Information provided will be used by the CHIPS External Affairs Office to schedule and coordinate engagements with CHIPS stakeholders.

Routine Uses: The information is used for the purposes set forth above and may be shared with Department of Commerce staff for work-related purposes. In addition to those disclosures generally permitted under the Privacy Act of 1974, as amended, § 5 U.S.C. 552a(b), records maintained as part of this system of records may be disclosed subject to all of the published routine uses as identified in the Privacy Act System of Records Notice [COMMERCE/DEPT-10](#), Executive Correspondence Files.

Voluntary Disclosure: Providing the information requested on this form is voluntary. CHIPS engagement requests may be submitted via the web portal at <https://askchips.chips.gov/> or the engagement request can be logged by a Department employee as a result of an engagement with an interested entity submitted via email, phone, or any means of contact. The web form submission is preferred as a simple method to provide all information associated with an engagement request. If submission is via any system other than the web-based application, a Department employee will submit the information into the system.



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How are we doing?

Feedback

Dept of Commerce User

Requestor Information Section for a DOC user

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OMB Control #0693-XXX

Expiration Date: XX/XX/XXXX

Requestor Information

* First name

* Last name

* Business Email

* Business Phone number

* Business Organization

* Do you currently work for the Department of Commerce?

Is this request proactive or reactive?

Field only appears if "Do you currently work for the Department of Commerce" field = Yes;
Drop Down Values: Proactive, Reactive

If the user answers "Yes" to this question, the next field below appears.

Requestor Information Section for a DOC user

NIST

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OMB Control #0693-XXX

Expiration Date: XX/XX/XXXX

Requestor Information

* First name

* Last name

* Business Email

* Business Phone number

* Business Organization

* Do you currently work for the Department of Commerce?

Is this request proactive or reactive?

Do you recommend that CHIPS staff take this meeting?

If the user answers "Reactive" to this question, the next field appears.

Field only appears if "Do you currently work for the Department of Commerce?" field = Yes and if "Is this request proactive or reactive?" field = Reactive;
Drop Down Values: Yes/No

Contact Information Section for a DOC user

These fields only appear if the user selected “Yes” in the “Do you currently work for the Department of Commerce?” field (see previous slide).

Contact Information

Internal contact first name

Internal contact last name

Internal contact business email

External contact first name (if different from requestor)

External contact last name (if different from requestor)

External contact business email (if different from requestor)

External Contact Organization (Business)

Information about this request Section for a DOC user
(is the same for a non-DOC user)

Information about this request

* Type of request
--Select--
Drop Down Values: Announcement, Briefing, Event, Fireside Chat, Interview, Keynote, Meeting, Panel, Roundtable, Webinar

* Title of event or meeting

* Who is the event host?

* Will the event be onsite or virtual?
Onsite
Drop Down Values: Onsite, Virtual

Please provide the city of the event or meeting
Field only appears if answer to "Will the event be onsite or virtual?" is Onsite

* Please provide the state of the event or meeting
--Select--
Field only appears if answer to "Will the event be onsite or virtual?" is Onsite
Drop Down Values: [2 letter codes for all US states]

* What is the purpose of this request?

* Expected discussion topics

Please select if there will be a CHIPS or DOC speaking role
Yes
Drop Down Values: Yes, No

Requested Speaker
--Select--
Field only appears if answer to "Please select if there will be a CHIPS or DOC speaking role" is "Yes".
Drop Down Values:
Secretary of Commerce - Gina Raimondo
Deputy Secretary - Don Graves
Under Secretary of Commerce/Director of NIST - Laurie Locascio
CHIPS Program Office Director - Michael Schmidt
CHIPS R&D Office Director
NSTC Director
CHIPS R&D Metrology Director
Other

Additional Speaker Information
Field only appears if answer to "Please select if there will be a CHIPS or DOC speaking role" is "Yes".

Information About this Request Section [continued] for a DOC user
(Is the same for a non-DOC user)

Preferred date/time

*Date *Time

Length of speaking time (in minutes)

1st alternative date/time

Date Time

2nd alternative date/time

Date Time

*Will press be present?

--Select--

Drop Down Values:

Yes

No

Please provide the number of anticipated attendees

Field only appears if answer to "Will press be present?" is Yes

*If this request is for a meeting: If you anticipate that VIPS will attend, please provide names and titles

Submit

Disclosures for a DOC user (is the same for a non-DOC user)

Submit

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How are we doing?

Feedback

All Fields shown with drop
downs



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OMB Control #0693-XXX

Expiration Date: XX/XX/XXXX

Requestor Information

* First name

* Last name

* Business Email

* Business Phone number

* Business Organization

* Do you currently work for the Department of Commerce?

Values: Yes/No

Is this request proactive or reactive?

Field only appears if "Do you currently work for the Department of Commerce" field = Yes;
Values: Proactive, Reactive

Do you recommend that CHIPS staff take this meeting

Field only appears if "Do you currently work for the Department of Commerce?" field = Yes and if "Is this request proactive or reactive?" field = Reactive;
Values: Yes/No

Contact Information

Internal contact first name

Field only appears if "Do you currently work for the Department of Commerce" field = Yes;

Internal contact business email

Field only appears if "Do you currently work for the Department of Commerce" field = Yes;

External contact first name (if different from requestor)

External contact business email (if different from requestor)

Internal contact last name

Field only appears if "Do you currently work for the Department of Commerce" field = Yes;

External contact last name (if different from requestor)

External Contact Organization (Business)

No dropdowns

Information about this request

* Type of request

--Select--
Values: Announcement, Briefing, Event, Fireside Chat, Interview, Keynote, Meeting, Panel, Roundtable, Webinar

* Who is the event host?

Please provide the city of the event or meeting

Field only appears if Onsite

* What is the purpose of this request?

Please select if there will be a CHIPS or DOC speaking role

Yes
Values: Yes/No

* Title of event or meeting

* Will the event be onsite or virtual?

Onsite
Values: Onsite, Virtual

* Please provide the state of the event or meeting

--Select--
Field only appears if Onsite;
Values: [2 letter codes for all US states]

* Expected discussion topics

Requested Speaker

--Select--
Field only appears if Speaking Role = Yes;
Values: Secretary of Commerce - Gina Raimondo; Deputy Secretary - Don Graves; Under Secretary of Commerce/Director of NIST - Laurie Locascio; CHIPS Program Office Director - Michael Schmidt; CHIPS R&D Office Director; NSTC Director; CHIPS R&D Metrology Director; Other

Additional Speaker Information


Field only appears if Speaking Role = Yes

Preferred date/time

* Date  * Time 

1st alternative date/time

Date  Time 

* Will press be present?
  Values: Yes/No

Please provide the number of anticipated attendees

* Please provide any additional information relating to this request

Submit

Length of speaking time (in minutes)

2nd alternative date/time
Date  Time 

Please provide press information
 Field only appears if Press = Yes

* If this request is for a meeting: If you anticipate that VIPS will attend, please provide names and titles

Submit

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