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

TITLE OF INFORMATION COLLECTION: Participant Feedback on Early Care and Education-Receiving Individualized Support for Evaluation Capacity Building Kickoff Convening

PURPOSE: The Office of Planning, Research, and Evaluation (OPRE) will host a kick off meeting with representatives from the two state Child Care and Development Fund (CCDF) Lead Agencies that are participating in *Early Care and Education-Receiving Individualized Support for Evaluation Capacity Building* (ECE-RISE). The purpose of this voluntary collection is to solicit feedback that will help Mathematica, as the contractor for the project, understand if the learning objectives for the kickoff convening were achieved and will inform the way Mathematica supports participants in the future.

DESCRIPTION OF RESPONDENTS: Representatives from the CCDF lead agencies in two states—Texas and Mississippi—that have been selected to receive individualized support to build research and evaluation capacity through ECE-RISE.

TYPE	OF	COL	LEC	TT	$on \cdot$
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[] Customer Comment Card/Complaint Form	[X] Customer Satisfaction Survey
[] Usability Testing (e.g., Website or Software	[] Small Discussion Group
[] Focus Group	[] Other:
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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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The primary purpose of the results is <u>not</u> for public dissemination.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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 and affiliation: <u>Alysia Blandon, Senior Social Science Research Analyst; Office of Planning, Research, and Evaluation</u>

To assist review, please provide answers to the following questions:

Personally Identifiable Information:

- 1. Is personally identifiable information (PII) collected? [] Yes [X] 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
- 3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [] Yes [] No

Gifts	or	Pay	ments:
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Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

BURDEN HOURS

Information Collection	Category of Respondent	No. of Respondents	No. of Responses per Respondent	Estimated Time per Response	Burden Hours
Participant Feedback on ECE-RISE Kickoff Convening	3-State CCDF Agency Team Members (State, local, or tribal government representatives)	20	1	6 minutes	2 hours
	Totals	20	1	6 minutes	2 hours

FEDERAL COST: The estimated annual cost to the Federal government is _____\$750

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	om this universe	e?
		[X] Vec	[1]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?

The universe of potential respondents is the CCDF lead agency team members who attend the kickoff meeting at which the poll is distributed. We will survey the full universe and thus do not have a sampling plan.

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
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2. Will interviewers or facilitators be used? [] Yes [X] No

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