## Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB#: 0925-0648 Exp., date: 06/30/2024)

**TITLE OF INFORMATION COLLECTION:** NIH Training Expo Survey (WSDD/OD)

**PURPOSE:** The survey for the NIH Training Expo is a tool to gauge the experience of attendees at the virtual event to be conducted on April 6, 2022. The information retrieved will be used not only to assess the value of this event but will assist with planning future events in terms of the targeted community, scaling and content.

**DESCRIPTION OF RESPONDENTS**: NIH staff to include federal employees and contractors.

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

[ ] Customer Comment Card/Complaint Form [x ] Customer Satisfaction Survey

[ ] Usability Testing (e.g., Website or Software [ ] Small Discussion Group

[ ] Focus Group [ ] 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. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential 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: Kimberly H. Doherty\_

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

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [x] 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** |
| Individuals | 150 | 1 | 1/60 | 3 |
|  |  |  |  |  |
| **Totals** |  | 150 |  | **3** |

**COST TO RESPONDENT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Category of Respondent** | **Total Burden**  **Hours** | **Hourly Wage Rate\*** | **Total Burden Cost** |
| Individuals | 3 | $39.75 | $119 |
|  |  |  |  |
| **Totals** |  |  | $119 |

\*[Budget Analysts (bls.gov)](https://www.bls.gov/oes/current/oes132031.htm)

**FEDERAL COST:** The estimated annual cost to the Federal government is $139

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff** | **Grade/Step** | **Salary\*** | **% of Effort** | **Fringe (if applicable)** | **Total Cost to Gov’t** |
| **Federal Oversight** |  |  |  |  |  |
| NIHTC Program Manager | GS13-10 | $138,868 | .1% |  | $139 |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Contractor Cost** |  |  |  |  | 0 |
|  |  |  |  |  |  |
| Travel |  |  |  |  | 0 |
| Other Cost |  |  |  |  | 0 |
|  |  |  |  |  |  |
| **Total** |  |  |  |  | $139 |

\* the Salary in table above is cited from [General Schedule (opm.gov)](https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/2022/general-schedule/)

**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? [x ] 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 provide a description of how you plan to identify your potential group of respondents and how you will select them?

The survey will be distributed to participants of the NIH Training Expo. Participation in the survey is voluntary.

**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 Prog

[ ] In-person

[ ] Mail

[ ] Other, Explain

1. Will interviewers or facilitators be used? [ ] Yes [x ] No