

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

TITLE OF INFORMATION COLLECTION: Future of Work Survey (NEI)

PURPOSE: Collect feedback from NEI staff and contractors on employee engagement and meetings in a hybrid environment. Use results as a baseline for future evaluations and to shape current recommendations for internal practices.

DESCRIPTION OF RESPONDENTS:

NEI staff (FTE and non-FTE) and contractors

TYPE OF COLLECTION: (Check one)

- | | |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | X Other: <u>feedback</u> |
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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 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: Trevor Peterson

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 | 285 | 1 | 5/60 | 24 |
| Totals | | 285 | | 24 |

COST TO RESPONDENT

| Category of Respondent | Total Burden Hours | Hourly Wage Rate* | Total Burden Cost |
|------------------------|--------------------|-------------------|-------------------|
| Private Sector | 24 | \$38.15 | \$916 |
| Totals | | | \$916 |

*https://www.bls.gov/oes/2020/May/oes_nat.htm#19-0000

FEDERAL COST: The estimated annual cost to the Federal government is \$800

| Staff | Grade/Step | Salary* | % of Effort | Fringe (if applicable) | Total Cost to Gov't |
|--------------------------|------------|-----------|-------------|------------------------|---------------------|
| Federal Oversight | | | | | |
| Management Analyst | 14/9 | \$159,894 | 0.5% | | \$800 |
| | | | | | |
| Contractor Cost | | | | | |
| | | | | | |
| Travel | | | | | |
| Other Cost | | | | | |
| | | | | | |
| Total | | | | | \$800 |

*the Salary in table above is cited from <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?

All NEI Staff—access will be by active directory account, limited to one response per user. Survey will be marketed to all staff, but voluntary participation.

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

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