

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 Director’s Awards Ceremony

PURPOSE:

The purpose of the survey is to assess the awardees’ satisfaction with the virtual ceremony website and get feedback that will help us improve future ceremonies

DESCRIPTION OF RESPONDENTS:

All recipients of an NIH Director’s Awards

TYPE OF COLLECTION: (Check one)

- | | |
|------------------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" 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 | <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. 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: Sheila A. Verges-Osuna

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 No

ESTIMATED BURDEN HOURS and COSTS

Forms	Category of Respondent	No. of Respondents	No. of Responses per Respondent	Time per Response (in hours)	Total Burden Hours
Customer Satisfaction Survey	individuals	1924	1	4/60	128
Totals			1924		128

COST TO RESPONDENTS

Category of Respondent	Total Burden Hours	Hourly Wage Rate*	Total Burden Cost
NIH Director’s Awards Awardees	128	\$28.01	\$3,585
Totals			\$3,585

*Cite source per bls.gov if applicable

The hourly rate for All occupations was obtained from https://www.bls.gov/oes/current/oes_nat.htm#00-0000

FEDERAL COST: The estimated annual cost to the Federal government is: \$2,673.99

Staff	Grade/Step	Salary*	% of Effort	Fringe (if applicable)	Total Cost to Gov’t
Federal Oversight					
Program Manager	13/1	\$106,823	1%		\$1,068.23
Intern	6/1	\$45,574	2%		\$911.48
Section Chief	14/4	\$138,856	.005%		\$694.28
Travel					
Other Cost					
Total					2,673.99

**The NIH Federal Employee and Contractor Salaries were estimated based on the locality pay for the DC-MD-VA-WV-PA salary table: <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2022/DCB.pdf>

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 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?

List of all recipients of an NIH Director's Award

Administration of the Instrument

1. How will you collect the information? (Check all that apply)

- Web-based or other forms of Social Media
- Telephone
- In-person
- Mail
- Other, Explain

2. Will interviewers or facilitators be used? Yes No

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