## Request for Approval under the clearance of the “Generic for ACF Program Office Monitoring Activities” Office of Management and Budget (OMB) Control Number: 0970-0558

**TITLE OF INFORMATION COLLECTION:** Office of Refugee Resettlement Refugee Family Child Care Microenterprise Development Case File Requirements

**PURPOSE:** The Administration for Children and Families (ACF)Office of Refugee Resettlement (ORR) requires Refugee Family Child Care Microenterprise Development (RFCCMED) Program funding recipients to keep records of documents related to grant spending and performance of program-related activities. This specific record keeping requirement allows ORR to specify records RFCCMED program funding recipients must keep. Through monitoring activities, ORR will ensure that the necessary records are kept by funding recipients.

This information collection aligns with the overarching generic for monitoring activities, which specifically states that the information collected will allow ACF to:

* Monitor compliance with federal practice, guidelines and requirements
* Have flexible and responsive oversight of federal funds
* Provide support as needed

The proposed uses of the data also align with the overarching generic, which specifies that program offices will use information collected under this generic clearance to monitor funding recipient activities, including assessing progress towards meeting NOFO objectives and confirmation of compliance with grant requirements.

This is a record keeping requirement; information will not be collected by ORR.

**DESCRIPTION OF RESPONDENTS:** (e.g., states, grantees, or type of non-profit)

ORR RFCCMED grant recipients

**CERTIFICATION:**

I certify the following to be true:

1. The collection is in compliance with U.S. Health and Human Services regulations.
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. Information gathered will not be used for the purpose of substantially informing influential policy decisions.

Name: Ryan Foster, Refugee Services Program Specialist

To assist OMB review of your request, please provide answers to the following questions:

**PERSONALLY IDENTIFIABLE INFORMATION:**

1. Is personally identifiable information (PII) collected? [ X ] Yes [ ] No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [ ] Yes [ X ] No
3. If Yes, has an up-to-date System of Records Notice been published? [ ] Yes [ ] No

Information collected by the recipient will include PII but this information will not be collected by ORR.

**BURDEN HOURS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category of Respondent**  | **No. of Respondents** | **No. of Responses per Respondent per year** | **Burden per Response****(hours)** | **Annual Burden****(hours)** |
| RFCCMED Recipients | 15 | 1 | 10 | 150 |

ORR will not require annual responses but will require that this information is collected by the recipient and made available for ORR review during monitoring or when other circumstances may require review.

**FEDERAL COST:** The estimated annual cost to the Federal Government is $0.

**TYPE OF COLLECTION:**

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

[ ] Web-based

[ ] E-mail

[ ] Paper mail

[ X ] Other, Explain

 Record keeping request

**Please make sure to submit all instruments, instructions, and scripts with the request.**