# **Request for Approval under the “Administration for Children and Families Generic for Information Collections Related to Gatherings”**

## **(OMB Control Number: 0970-0617)**

**TITLE OF INFORMATION COLLECTION:** National Center on Substance Abuse and Child Welfare Convening Attendee Recommendation Information Collection

**PURPOSE:** The purpose of this survey is to collect information on individuals that respondents recommend for attendance at a planned convening. Information will be used for planning purposes.

**DESCRIPTION OF RESPONDENTS**: Combination of state, local, and tribal representatives from child welfare, dependency court, substance use and mental health treatment, maternal and infant health, early childhood, and law enforcement systems; representatives from parent and child attorney groups and Guardian ad Litem groups; representatives from federally, state, local, and tribal funded agencies; community based agencies; federal representatives; and individuals with lived experience who can recommend individuals to attend a specific topical convening held by the National Center on Substance Abuse and Child Welfare (NCSACW).

**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 information collected is not intended to be disseminated to the public[[1]](#footnote-3).
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.

Name and affiliation: Surina Amin, Child Welfare Program Specialist

To assist review, please provide the following information:

**BURDEN HOURS**

The estimated burden includes registration for about 6 total annual Convenings that may require attendee recommendations. The time to complete the questions is estimated to average about five minutes.

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| --- | --- | --- | --- | --- |
| **Instrument Title** | **Category of Respondent** | **No. of Respondents** | **Participation Time** | **Burden** |
| NCSACW Convening Attendee Recommendation Information Collection | Private Sector  | 50 | 5 minutes | 4 hours |
| NCSACW Convening Attendee Recommendation Information Collection | State, Local, or Tribal Government | 50 | 5 minutes | 4 hours |
| **Totals**  |  | **100**  | **5 minutes**  | **8 hours** |

**FEDERAL COST:** The estimated annual cost to the Federal government is $640.

**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

1. The information collected through this request is primarily for internal review and will not be published. However, for certain activities information submitted by accepted participants, such as research abstracts to be presented in a poster session, may be published on an ACF website or included in a printed or online program for the activity or subsequent publication describing the activity. [↑](#footnote-ref-3)