Request for Approval under the "DOL Departmental Generic Clearance for the Collection of Routine Customer Feedback"

(OMB Control Number: 1225-0088)

TITLE OF INFORMATION COLLECTION: Employment Navigator Client Satisfaction Survey

PURPOSE:

As part of the Employment Navigator and Partnership Pilot (ENPP), VETS wishes to collect anonymized satisfaction data after a service member or a spouse has received employment-related services from an Employment Navigator. The purpose of this short survey is to measure the effectiveness of the Employment Navigators as well as gauge the confidence of the service member in moving along a career pathway.

DESCRIPTION OF RESPONDENTS:

Respondents will be active-duty service members from all military branches. Some respondents will be referred as part of the Department of Defense's "Warm Handover" initiative where service members deemed to be not-career ready must visit an Employment Navigator, where available. Other participants will opt-in the pilot on their own.

TYPE OF COLLECTION: (Check one)	
[] Customer Comment Card/Complaint Form [] Usability Testing (e.g., Website or Software [] Focus Group	
CERTIFICATION:	
I certify the following to be true:	
1. The collection is voluntary.	
2. The collection is low-burden for respondents a	nd low-cost for the Federal Government.
3. The collection is non-controversial and does <u>not</u> agencies.	
4. The results are <u>not</u> intended to be disseminated	l to the public.
5. Information gathered will not be used for the policy decisions.	<u>*</u>
6. The collection is targeted to the solicitation of experience with the program or may have expe	<u> •</u>
Name: Luke A. Murren	
To assist review, please provide answers to the fol	lowing question:
Personally Identifiable Information:	
1. Is personally identifiable information (PII) col	lected? [] Yes [X] No

 If Yes, is the information that will be collected included Privacy Act of 1974? [] Yes [] No If Applicable, has a System or Records Notice been Not Applicable Gifts or Payments: Is an incentive (e.g., money or reimbursement of expension participants? [] Yes [X] No 	published? [] `	Yes [] No	
BURDEN HOURS			
Category of Respondent	No. of Respondents	Participation Time	Burden
Individual (military)	1,000	1.5 minutes	25 hrs
Totals			
FEDERAL COST: The estimated annual cost to the Fe cost is based on .5 full time employee for a survey admir annually) and half the cost of procuring survey software If you are conducting a focus group, survey, or plantage provide answers to the following questions: The selection of your targeted respondents 1. Do you have a customer list or something similar that respondents and do you have a sampling plan for selection of both the answer is yes, please provide a description of both the answer is no, please provide a description of how yo respondents and how you will select them? Participants will come from the Employment Navigator	nistration/data an annually (\$10,0) to employ statis at defines the university of the defines the defi	nalyst (\$200,000 00). stical methods, place of potential universe? es [X] No the the sampling place your potential g	ease an)? If roup of
Administration of the Instrument 1. How will you collect the information? (Check all that [X] Web-based or other forms of Social Media [] Telephone	e of participants	-	WIII
[] In-person [] Mail [] Other, Explain 2. Will interviewers or facilitators be used? [] Yes [>	ζ] No		

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

Instructions for completing Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback"

TITLE OF INFORMATION COLLECTION: Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on XXXXX)

PURPOSE: Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

DESCRIPTION OF RESPONDENTS: Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

TYPE OF COLLECTION: Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

CERTIFICATION: Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

Personally Identifiable Information: Provide answers to the questions.

Gifts or Payments: If you answer yes to the question, please describe the incentive and provide a justification for the amount.

BURDEN HOURS:

Category of Respondents: Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households;(2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected.

No. of Respondents: Provide an estimate of the Number of respondents.

Participation Time: Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

Burden: Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.

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. Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

Administration of the Instrument: Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

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