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: OPT Stakeholder Outreach Survey

PURPOSE:

The Office of Productivity and Technology (OPT) is conducting a web-based survey of data users to learn more about how OPT customers are using OPT data, to solicit feedback on OPT products, and for OPT staff to learn more about its customers. Information collected in the survey will be used internally to ensure OPT data and products are meeting customers' needs and to make improvements as needed.

DESCRIPTION OF RESPONDENTS:

The survey will target experienced users of OPT data products, including individuals from both private and public sectors, as well as academia. OPT plans to contact known stakeholders who are members of the OPT Stakeholders list which consists of users who have previously contacted our office for help or are contacts from professional/academic conferences with interest in productivity data. In addition, OPT will post a link to the survey on their program web pages in the top announcements section. OPT estimates the email group consists of 374 email addresses. We anticipate a maximum of 40% of the data users will respond to the survey, plus a maximum of 160 respondents from website traffic, for a total of 310 responses. This is a similar estimate to the previous OPT stakeholder survey conducted in 2010, which received 342 responses from OPT data users. In addition, OPT has a list of people who receive automatic emails for each of the 7 productivity releases, each of which range from 22,315 to 32,018 emails, totaling 174,008 and may contain duplicates if people subscribed to more than one of the releases. The general response rate for these types of subscription lists results in 1%, or a maximum of 1,740 responses. This amounts to a grand total of a maximum of 2,050 responses.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form	[X] Customer Satisfaction Survey
[ ] Usability Testing (e.g., Website or Software	[ ] Small Discussion Group
[ ] Focus Group	[ ] 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:_____Lucy P. Eldridge____

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

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Individuals (OPT data users)	2,050	10 minutes	342 hours
Totals			

FEDERAL COST: The estimated annual cost to the Federal government is $4,536.00, including 10 hours to develop questions for the survey, 12 hours to program the survey instrument, and 20 hours to analyze the results. (Calculation is 42 hours x $54.00 (GS 14/2)).

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?

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.

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.