**OMB Control Number: 1225-0093**

**OMB Expiration Date: 02/29/2024**

OSHA

Screening Survey for Participants in the Focus Group on the Experience of Special Government Employees (SGEs) in the Voluntary Protection Programs

The following questions will be uploaded onto DOL’s Survey Monkey account. There are currently 1,084 SGEs across the country. We will be sending out a screener survey to identify individuals who are attending the VPPPA Safety+ Conference. From the list of respondents, OSHA will identify a representative group of SGEs for the focus group sessions.

Burden Statement

A Federal agency may not conduct or sponsor an information collection subject to the requirements of the Paperwork Reduction Act unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 1225-0093 (expires 02/29/2024). Without this approval, we could not conduct this survey. Public reporting for this survey is estimated to be approximately 15 minutes per response. All responses to this survey are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to Madeline Martinez at Martinez.Madeline.M@dol.gov.

The screening survey will begin with the following, abbreviated burden statement:

* Control No. 1225-0093 (expires 02/29/2024)
* Estimated burden time: 15 minutes
* All responses to this survey are voluntary.
* Send comments about this survey to Madeline Martinez at [Martinez.Madeline.M@dol.gov](mailto:Martinez.Madeline.M@dol.gov)

Form Approved

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Screening Survey Questions

1. Name:
2. Email:
3. Please select type of employee (select all that apply)
   * Supervisor/Manager
   * Safety Professional
   * Health Professional
   * Other:
4. [Branching based on selection of Safety Professional and/or Health Professional in Q3] How many years have you been in safety/health (please enter a number between 0-50): \_\_
5. Please select type of specialization (select all that apply)
   * PSM- Level 1
   * Construction
   * Mobile Work Force VPP site
   * Ergonomics
   * CIH
   * Maritime
   * Other:
6. Please select type of employer:
   * Department of Defense
   * Federal Employee
   * Department of Energy
   * Private sector
7. Please select all the VPP activities that you’re responsible at your worksite:

* preparing the annual self-evaluation report for your worksite
* mock audits
* preparing for the VPP on-site evaluation at your worksite
* communicating with OSHA staff
* communicate with other SGEs at different worksites or companies about SGE or VPP activities.
* others: \_\_\_\_\_\_\_

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1. What qualifying activities outside of your VPP worksite have you participated on in the past 3 years (please select all that apply):

* On-site audits
* Mentoring VPP sites
* Reviewing VPP applications
* Instructing SGE courses
* Review Annual Self-Evaluations
* Other:\_\_\_\_\_\_

1. How many SGE activities have you participated on in the past 3 years (please enter a number between 0 and 20): \_\_
2. Are you attending the VPPPA Safety+ Conference in Orlando, Florida in September?

* Yes, I am attending the VPPPA Safety+ Conference in Orlando, Florida
* No, I am NOT attending the VPPPA Safety+ Conference in Orlando, Florida

1. [Branching based on selection of YES in Q10] Are you interested in participating in an in-person SGE Focus Group Interview to describe your experience as an SGE? Saying yes now is not a commitment on your part. You are free to change your mind on participation.
   * Yes
   * No
2. [Branching based on selection of NO in Q10] Are you interested in participating in a virtual SGE Focus Group Interview to describe your experience as an SGE? Saying yes now is not a commitment on your part. You are free to change your mind on participation.
   * Yes
   * No

Thank you for your time!