

**Request for Approval under the “Generic Clearance for the Collection of
Routine Customer Feedback” (OMB Control Number: 0970-0401)**

TITLE OF INFORMATION COLLECTION: Participant Feedback for the Evaluation and Monitoring 101 Training

PURPOSE: The purpose of this voluntary collection is to solicit feedback from participants who attend the virtual two-day “Evaluation and Monitoring 101” training that the Office of Planning, Research, and Evaluation (OPRE) will host in April of 2022. This feedback will help OPRE improve service delivery in future years.

DESCRIPTION OF RESPONDENTS: Respondents will be contractors working within the Administration for Children and Families who attend the training.

TYPE OF COLLECTION:

☐ Customer Comment Card/Complaint Form	☒ 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 primary purpose of the results is not for public dissemination.
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 and affiliation: Nicole Constance
Deputy Director, Division of Economic Independence
Office of Planning, Research, and Evaluation

To assist review, please provide answers to the following questions:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? ☐ 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 ☐ No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? ☐ Yes ☐ No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? ☐ Yes ☒ No

BURDEN HOURS

Information Collection	Category of Respondent	No. of Respondents	No. of Responses per Respondent	Estimated Time per Response	Burden Hours
Session Feedback Survey	2 – Federal government contractors	36	7	2 mins	8.4
Training Feedback Survey	2 – Federal government contractors	36	1	3 mins	1.8
Totals		36	8	2.125 mins	10.2

FEDERAL COST: The estimated annual cost to the Federal government is _____ \$500 _____

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?
[X] Yes [] 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?

The universe of potential respondents is all training attendees. We will survey the full universe and thus do not have a sampling plan.

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.