

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

TITLE OF INFORMATION COLLECTION: Feedback Survey for the Region III Training and Technical Assistance Network Training Series: Recruit, Retain and Sustain.

PURPOSE: The ACF Region III, in collaboration with the Head Start National Center on Program Management and Fiscal Operations (PMFO), has provided a Training and Technical Assistance T/TA series for Head Start grantees in that region. The twelve-part series, titled *Region III T/TA Network Training Series: Recruit, Retain and Sustain* provides grantees with information to support the development of a strong human resource system for recruiting, retaining, and sustaining a high-quality workforce.

The proposed feedback survey will be administered after the last training event of this twelve-part series and will collect information from participants about their satisfaction with the event and any changes in terms of their own awareness and learning as relates to recruiting, retaining, and sustaining their workforce. This survey will provide timely feedback to PMFO managers and regional TTA network staff in an efficient manner to improve future programming of series that are similar to this one.

DESCRIPTION OF RESPONDENTS:

Respondents include Head Start grantees—either executive leadership or managerial staff—who participated in the Region III T/TA Network: Recruit, Retain, and Sustain series. Response rate is estimated at 50%.

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: David Jones, Senior Program Specialist/Federal Project Officer, Office of Head Start

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
Feedback Survey for the Region III T/TA Network: Recruit, Retain and Sustain series	Head Start grantee - managerial personnel and executive leadership	60	1	10 minutes	10 hours
Totals		60			10

FEDERAL COST: The estimated annual cost to the Federal government is \$1573.

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 ☐ 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?

For the Region III T/TA Network feedback survey the PMFO team will receive a roster of participants. This information will be shared with the PMFO evaluation team who will utilize the email addresses from this list to administer the web-based survey.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
☒ Web-based or other forms of Social Media

- ☐ Telephone
- ☐ In-person
- ☐ Mail
- ☐ Other, Explain

2. Will interviewers or facilitators be used? ☐ Yes ☒ No

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