Request for Approval under the "1225-0059, Department of Labor Generic Solution for Outreach Activities"
(OMB Control Number: 1225-0559)

TITLE OF INFORMATION COLLECTION: National Apprenticeship Week Event and Proclamation Forms

PURPOSE:

National Apprenticeship Week (NAW) is a nationwide celebration where industry, labor, equity, workforce, education, and government leaders host events to showcase the successes and value of Registered Apprenticeship for re-building our economy, advancing racial and gender equity, and supporting underserved communities. NAW is an opportunity to highlight how Registered Apprenticeship, a proven and industry-driven training model, provides a critical talent pipeline that can help to address some of our nation's pressing workforce challenges such as rebuilding our country's infrastructure, addressing critical supply chain demands, supporting a clean energy workforce, modernizing our cybersecurity response, and responding to care economy issues.

Registered Apprenticeship stakeholders are encouraged to host local apprenticeship-related events and sign proclamations using these forms:

- The **Event and Proclamation Registration Form** links give apprenticeship stakeholders and champions (employers, education institutions, Members of Congress, labor unions, industry associations, city, State and federal, and community-based organizations) an opportunity to tell us and the public about the NAW events and proclamations they're hosting and signing across the country. It is also an opportunity for DOL to track the impact and progress of NAW.
    - The **Event Registration Form** link includes event related information such as the name of the organization hosting the event, the date, time, and location of the event, a brief description (500 words or less), and point of contact in case people want more information.
    - The **Proclamation Registration Form** link includes proclamation related information such as the name of the signatory/signatories, the date and location, a link to a digital copy, and a point of contact in case people want more information.
- The **Event or Proclamation Update Form** link gives individuals who previously submitted an Event or Proclamation Registration Form to update the details prior to the event taking place so that DOL can update it on the website and the public can view the most up-to-date information. The update form requests contact information to appropriately match the updates with the preexisting event or proclamation, and then an opportunity to describe what the contact would like changed on their event or proclamation listing.
- The **Event Highlight Form** link gives individuals an opportunity to share highlights from their completed NAW event(s) with DOL. The information may then be used publicly by DOL to celebrate the success of NAW. The highlight form requests contact information to appropriately match the highlight with the preexisting event, and then an opportunity to describe the highlight and add pictures.

Note that the information provided on all four of these forms are intended for public use on the Apprenticeship.gov website, so there is no need or expectation for confidentiality.

These forms were approved for NAW on 08/04/2021 under OMB Control Number 1225-0059 with an expiration date of 02/29/2024. Given that this package expires at the end of February 2024, the Office of Apprenticeship is re-submitting these forms for approval under an updated PRA package.

DESCRIPTION OF RESPONDENTS: Respondents are organizations working in Registered Apprenticeship (employers, labor organizations, industry associations, education organizations, workforce organizations, community-based organizations) as well as public officials and their staff who submit proclamations to celebrate NAW.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form   [ ] Customer Satisfaction Survey
[ ] Usability Testing (e.g., Website or Software   [ ] Small Discussion Group
[ ] Focus Group   [X] Other: Event Registration Form, Proclamation Registration Form, Event or Proclamation Update Form, and Event Highlight Form

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 <u>not</u> raise issues of concern to other federal agencies.
4.   The results are <u>not</u> intended to be disseminated to the public.
5.   Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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: Wendy Slee, Program Analyst

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

Personally Identifiable Information:
1.   Is personally identifiable information (PII) collected? [X] Yes [ ] No
2.   If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?   [ ] Yes [X] No
3.   If Applicable, has a System or Records Notice been published? [ ] Yes [X] 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 and Households			
Private Sector	1700	4 minutes each	113.33 hours
State, Local, or Tribal Governments	250	4 minutes each	16.66 hours
Federal Government	50	4 minutes each	3.33 hours
Totals	**2000**		**133.32 hours**

FEDERAL COST: The estimated annual cost to the Federal government is: $0.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

N/A – Respondents will self-select by accessing the public website and voluntarily registering events and proclamations.

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
            Percentage of Respondents Reporting Electronically: 100%
      [ ] 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 a Generic Clearance

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.

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.