

**Request for Approval under the “Administration for Children and Families Generic for Information Collections Related to Gatherings”
(OMB Control Number: 0970-0617)**

TITLE OF INFORMATION COLLECTION: Office of Child Care Tribal Cluster Meeting Registration Questions

PURPOSE: The Office of Child Care (OCC) provides Tribal Child Care and Development Fund (CCDF) grantees with training and technical assistance (T/TA) through its Tribal Cluster Meeting. The purpose of this information collection is to collect information about potential meeting participants to allow meeting organizers to compile proper resources and tools for participants, and also to track grantee attendance and receipt of T/TA.

DESCRIPTION OF RESPONDENTS: Respondents include potential meeting participants, including the Tribal CCDF Administrator and fiscal staff from CCDF Lead Agencies; federal staff from OCC and the Office of Grants Management¹; and staff from OCC’s contracted technical assistance providers.

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 information collected is not intended to be disseminated to the public².
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.

Name and affiliation: Stacy Cassell, Office of Child Care

Personally Identifiable Information:

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

¹ This information collection falls within the scope of these federal employees’ work duties and therefore burden is not included for these respondents.

² The information collected through this request is primarily for internal review and will not be published. However, for certain activities information submitted by accepted participants, such as research abstracts to be presented in a poster session, may be published on an ACF website or included in a printed or online program for the activity or subsequent publication describing the activity.

BURDEN HOURS

| Instrument Title | Category of Respondent | No. of Respondents | Participation Time | Burden |
|--|-------------------------------|---------------------------|---------------------------|--------------------|
| Tribal Cluster Training Registration Questions | Tribal Government | 170 | 5 minutes | 14.17 hours |
| Tribal Cluster Training Registration Questions | Private Sector | 20 | 5 minutes | 1.67 hours |
| Totals | | 190 | 5 minutes | 15.84 hours |

FEDERAL COST: The estimated annual cost to the Federal government is \$400.

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

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