

Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 2700-0153)

TITLE OF INFORMATION COLLECTION: Survey for understanding skill gaps of identified Data Stewards within the NASA’s Data Steward Community of Practice (CoP).

PURPOSE:

NASA’s Data Steward Community of Practice (CoP) was established in order to engage members across the NASA community and support the future launch of the Data Stewardship Service Offering across NASA. The *Data Steward Skill Assessment Survey* has been developed in order to help better identify the skill gaps for Data Stewards. The survey will guide us on future training recommendations once we know where those excel and where those need to upskill. The optional Microsoft Forms survey include questions revolving around understanding skill levels across 8 topics areas, including a data terms assessment section.

DESCRIPTION OF RESPONDENTS:

NASA Data Steward Community of Practice (CoP) participants (civil servants and contractors) who volunteer to take the survey.

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> 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 results are not intended to be disseminated to the public.
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: Briana Hila

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

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

Category of Respondent	No. of Respondents	Participation Time	Burden
Private Sector (NASA HQ Contractors)	10	10 minutes	1.7 hours
Federal Government (NASA HQ Civil Servants)	20	10 minutes	3.3 hours
Totals	30		5 hours

FEDERAL COST: \$0 cost

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

- 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?

Potential respondents of the survey will be members of the Data Steward CoP who have identified as Data Stewards through our *Data Stewardship Role & Member Profile Self-Identification Survey*.

Administration of the Instrument

- How will you collect the information? (Check all that apply)
 Web-based
 Telephone
 In-person
 Mail
 Other, Explain
- Will interviewers or facilitators be used? Yes No

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