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

**TITLE OF INFORMATION COLLECTION:** NASA's Data Steward Community of Practice (CoP) Feedback Survey

#### **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 Stewardship Role & Member Profile Self-Identification Survey* has been developed in order to understand our members of the community in order to better engage them and provide them with future engagement opportunities. This optional Microsoft Forms survey for the CoP members will help provide insight into the members of the CoP and across the Agency, and ultimately help support the community at large. All questions are revolved around the roles of the members (i.e. if they identify as a Data Steward, what they do in their respective role) and engagement opportunities (i.e. how they prefer to be engaged, how involved they would like to be, etc.).

### **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) [ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software [ ] 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 <u>not</u> 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 <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: Briana Hila

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

### **Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [X] No

<ul><li>2. If Yes, will any information that is collected be included Privacy Act of 1974? [ ] Yes [ ] No</li><li>3. If Yes, has an up-to-date System of Records Notice (</li></ul>				
<b>Gifts or Payments:</b> Is an incentive (e.g., money or reimbursement of expens participants? [ ] Yes [X] No	es, token of app	reciation) provide	d to	
BURDEN HOURS				
Category of Respondent	No. of Respondents	Participation Time	Burder	
Private Sector (NASA HQ Contractors)	10	10 minutes	1.6	
Federal Government (NASA HQ Civil Servants)	190	10 minutes	31.6	
Totals	200		33.2	
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:				
<ul><li>The selection of your targeted respondents</li><li>1. Do you have a customer list or something similar that respondents and do you have a sampling plan for selection.</li></ul>		universe?	l	
If the answer is yes, please provide a description of both the answer is no, please provide a description of how yo respondents and how you will select them?	,	1 0 1	•	
Potential respondents of the survey will be members of t members).	he Data Steward	d CoP (roughly 20	)0	

### **Administration of the Instrument**

1.	How will you collect the information? (Check all that apply)
	[X] Web-based
	[ ] 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.