

## **Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: 3133-0188)**

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**TITLE OF INFORMATION COLLECTION:** CURE Minority Depository Institution Symposium Evaluation

**PURPOSE:** The National Credit Union Administration (NCUA) seeks feedback on the content of the MDI Symposium offered through the agency’s Office of Credit Union Resources and Expansion (CURE).

The Symposium evaluations are designed to collect information from the respondents about the sessions held at the Symposium and how well the topics covered addressed the needs of MDI credit unions. The evaluations will be available online through the agency’s Survey Monkey account. Respondents will receive an invitation by email with a link to the evaluation included.

**DESCRIPTION OF RESPONDENTS:** An evaluation will be issued to participants attending the MDI Symposium which will include MDI credit unions and other stakeholders in the industry. CURE has contacts within these organizations directly and through other contacts within the industry.

**TYPE OF COLLECTION:** (Check one)

- |  |   |
|--|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input 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 checked="" type="checkbox"/> Other: <u>Survey Monkey</u> |

**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: Dacia Rogers

Date: \_8/20/24

Program Contact: Ronald Goode, CURE

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 N/A
3. If Yes, has an up-to-date System of Records Notice (SORN) been published?  Yes  No N/A

**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
Credit Unions (Individuals) & Other Industry Stakeholders	60	8 Minutes	8
<b>Totals</b>	<b>60</b>		<b>8</b>

**FEDERAL COST:** \$1,100

*(The cost is estimated by 8 hours of analyst time and the cost of the survey platform to administer the feedback form to the respondents.)*

**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?

The feedback form will be sent to all attendees of the 3-day Symposium. There will be no sample selection, it will be a census of those attending.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)
 

<input checked="" type="checkbox"/> Web-based or other forms of Social Media	<input type="checkbox"/> In-person
<input type="checkbox"/> Telephone	<input type="checkbox"/> Mail
	<input type="checkbox"/> Other, Explain
2. Will interviewers or facilitators be used?  Yes  No