

**Request for Approval under the “Generic Clearance for Improving
Customer Experience: OMB Circular A-11, Section 280
Implementation”
(OMB Control Number:2900-0876)**

TITLE OF INFORMATION COLLECTION: Sturgis Rally VetFest 2024 Mini Registration

PURPOSE OF COLLECTION: The Veterans Experience Office (VEO) supports VA as the Secretary’s CX insight engine and shared service to partner with, support, and enable VA administrations and staff offices to provide the highest quality customer experience in the delivery of care, benefits, and memorial services to service members, Veterans, their families, caregivers, and survivors. As part of VEO, the Veterans, Family, and Community Engagement supports Veterans, families, caregivers, and survivors through Veterans Experience Action Centers (VEAC). The information collected in this Mini Registration will be used to drive outreach to Veteran attendees of the Sturgis Bike Rally.

TYPE OF ACTIVITY: (Check one)

- Customer Research (Interview, Focus Groups, Surveys)
- Customer Feedback Survey
- Usability Testing of Products or Services

ACTIVITY DETAILS

1. If this is a survey, will the results of this survey be reported to Touchpoints as part of quarterly reporting obligations specified in OMB Circular A-11 Section 280?
 - Yes
 - No
 - Not a survey

2. How will you collect the information? (Check all that apply)
 - Web-based or other forms of Social Media
 - Telephone
 - In-person
 - Mail
 - Other, Explain

3. Who will you collect the information from?

The Sturgis Rally VetFest 2024 Mini Registration will be shared via QR code in Flyers and handouts to the Veteran population among the nearly 500,000 attendees of Sturgis bike week.

4. How will you ask a respondent to provide this information?

The prospective respondents will be provided a QR code on business cards and on fliers. This QR code will take the respondents to a Survey Monkey Mini Survey that asks for basic demographic information, followed by a list of services the respondents can choose from in order for VA to reach back out to the respondent at a later date.

5. What will the activity look like?

The activity will be a simple, short Survey Monkey form with a survey burden of 2-3 minutes.

6. Please provide your question list.

Sturgis Rally VetFest 2024 Mini Registration

1. Customer First Name ***required**
2. Customer Last Name ***required**
3. City ***required**
4. State ***required**
5. Zip Code ***required**
6. Primary / Cell Phone (include area code) ***required**
7. Email Address ***required**
8. **What services are you interested in receiving information about?** (Select all that apply)

(VBA) File a new or increase claim for service-connection; obtain claim status for a previously filed claim; general counseling on claims for service-connection.

(VHA) Explore healthcare eligibility and enrollment, schedule health care appointments, speak to a patient advocate, and obtain general healthcare information and assistance on billing, Caregiver support, Care in the Community questions and referrals

(NCA) Obtain information on Burial and Memorial Services such as Military Honors, location of Veteran burial, grave markers, burial reimbursement, pre-need eligibility for burial. Determine if you or your partner qualify for burial in a VA National Cemetery.

(Community Services) Obtain information on community services such as employment, housing, pro- bono legal assistance, temporary financial assistance, food supplementation, faith services, family support, and education.

(State Benefits) Explore the many state benefits available to qualified Veterans: Fishing and Hunting license discounts, tuition waivers, employment assistance, reduced or no real property taxes, free license plates and vehicle registration.

Other

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

7. When will the activity happen?

The deployment of this activity will occur during the Sturgis Bike Week event from 2 to 8 August 2024. With VA call backs to provide service occurring in the following weeks.

8. Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?
 Yes No
 If Yes, describe:

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time (X minutes =)	Burden (÷ 60 =)
Individuals & Households	2,000	3	100
Totals	2,000	3	100

CERTIFICATION:

I certify the following to be true:

1. The collections are voluntary;
2. The collections are low-burden for respondents (based on considerations of total burden hours or burden-hours per respondent) and are low-cost for both the respondents and the Federal Government;
3. The collections are non-controversial;
4. Any 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 near future;
5. Personally identifiable information (PII) is collected only to the extent necessary and is not retained;
6. Information gathered is intended to be used for general service improvement and program management purposes
7. Upon agreement between OMB and the agency aggregated data may be released as part of A-11, Section 280 requirements only on performance.gov. Summaries of customer research and user testing activities may be included in public-facing customer journey maps.
8. Additional release of data will be coordinated with OMB.

Name and email address of person who developed this survey/focus group/interview:

Name: Howard A. (Tony) Davis

Email address: howard.davis10@va.gov

All instruments used to collect information must include:

OMB Control No. 2900-0876

Expiration Date: 02/28/2026

HELP SHEET
(OMB Control Number: 2900-0876)

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 xxxx)

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.

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: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

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 per row.

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: Multiply the Number of responses and the participation time and divide by 60.