Request for approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0704-0553)

TITLE OF INFORMATION COLLECTION:

DOD Survivor Symposium User Feedback Survey

PURPOSE:

Military Community and Family Policy would like to request feedback from those who attended the Defense Department's Survivor Symposium, occurring on Oct. 25, 2024. The feedback form will determine if the symposium and the information presented further the department's commitment to supporting survivors of active-duty deaths, including helping survivors understand all benefits and forms of assistance.

Request completion of an online feedback form with the following audience segment:

- Attendees of the DOD Survivor Symposium, occurring on Oct. 25, 2024

The objectives of the feedback form are to determine:

- Attendee satisfaction with the DOD Survivor Symposium
- Relevance of the information covered in the DOD Survivor Symposium
- Topics covered in future DOD Survivor Symposiums

DESCRIPTION OF RESPONDENTS:

Potential respondents are attendees of the DOD Survivor Symposium. After the symposium on Oct. 25, 2024, they will receive an email with a link to complete the online feedback. Participation is voluntary.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form	[X] Customer Satisfaction Survey
[ ] Usability Testing (e.g., Website or Software)	[ ] Small Discussion Group
[ ] 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 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: Josette Guinyard

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

Personally Identifiable Information:

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

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [ ] Yes [X] No

BURDEN HOURS

Category of Respondent	**No. of Respondents**	**Participation Time**	**Burden**
Surviving family members	53	.083	4.4
Service providers	34	.083	2.8
Other	18	.083	1.5
Totals	105	.083	9

Attendees of the DOD Survivor Symposium will be given the opportunity to provide their feedback via an online feedback form. The estimated burden of time per response averages five minutes. The numbers provided above are based on the total number of registrants as of Oct. 1, 2024. The final number of potential respondents will be based on the total number of participants at the DOD Survivor Symposium. The deadline for registering is Oct. 25, 2024.

FEDERAL COST: The estimated cost of this study to the federal government is approximately **$286.00.**

The service providers/others hourly wage was determined by using the hourly wage for GS12 Step 1 (Base Hourly Rate $35.67) from the Office of Personnel Management Website extension://efaidnbmnnnibpcajpcglclefindmkaj/https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/salary-tables/pdf/2024/GS_h.pdf. The surviving family members/Other mean hourly wage determined by using all occupations ($31.48) from the BLS website https://www.bls.gov/oes/current/oes_nat.htm#00-0000.

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

1. 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?

[X] Yes [ ] No

Potential respondents are attendees of the 2024 DOD Survivor Symposium, and they will be provided with a link to the online feedback form to provide voluntary feedback.

Administration of the Instrument

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

[X] Web-based or other forms of Social Media
[ ] Telephone
[ ] In-person
[ ] Mail
[ ] Other, Explain

2. Will interviewers or facilitators be used? [ ] Yes [X] No