



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

1. Title of information collection	Special Event After Action Survey
2. Purpose	To gather information from a sampling of people to measure stakeholder satisfaction, access opinions and gain other information about our Stennis events and activities from individuals who might otherwise be less likely to provide feedback.
3. Description of respondents	Event attendees

4. Type of collection (check one)

☐ Customer comment card/complaint form	☐ Customer satisfaction survey
☐ Usability testing (e.g., website, software)	☐ Small discussion group
☐ Focus group	☒ Other: After Action Survey

5. Personally identifiable information

Will PII be collected?	☐ Yes	☒ No
If yes: will any information that is collected be included in records that are subject to the Privacy Act of 1974?	☐ Yes	☐ No
If yes: has an up-to-date System of Records Notice (SORN) been published?	☐ Yes	☐ No

6. Gifts or payments

Is an incentive provided to participants? (e.g., money, reimbursement of expenses, token of appreciation)	☐ Yes	☒ No
---	------------------------------	--

7. Burden time per response

Category of respondent	Number of respondents	Participation time (list in minutes)	Burden time
Event Attendee	50	5	250 mins or 4.1 hours

8. Federal cost (Typically \$30 x total burden hours = federal cost. This cost includes: printing, shipping, IT, contracting, and does not include salaries)

There is no cost associated with the surveys because they are being distributed through Google Forms, an internet-based platform. No printing, mailing, graphic design, etc., is associated with this project. However, there is an annual fee for the Google Suite access to utilize google forms (\$230).

9. The selection of your targeted respondents

Do you have a customer list or similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?	☒ Yes	☐ No
If yes, please provide a description of both below (attach a sampling plan if available). A list will be developed based on event attendees.		
If no, please provide a description of how you plan to identify your potential group of respondents and how you will select them.		

10. Administration of the instrument (check all that apply)

☒ Web-based	☐ Telephone	☐ In person	☐ Mail
---	------------------------------------	------------------------------------	-------------------------------



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

☐ Other, please explain: Google Forms		
Will interviewers or facilitators be used?	☐ Yes	☒ No
Please provide the URL: https://forms.gle/BrWJisrfDdaqQtj2A		

11. Certification. Please certify the following to be true

☒	The collection is voluntary.
☒	The collection is low-burden for respondents and low-cost for the Federal Government.
☒	The collection is non-controversial and does <u>not</u> raise issues of concern to other federal agencies.
☒	The results are <u>not</u> intended to be disseminated to the public.
☒	Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> policy decisions.
☒	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: Valerie Buckingham	
Center, division, & program: Stennis Space Center, Office of Communications	