|  |  |
| --- | --- |
| 1. **Title of information collection** | AFRC Childcare Survey |
| 2. **Purpose** | The objective of this survey is to determine the current and potential future demand of childcare needs at AFRC. |
| 3. **Description of respondents** | NASA Armstrong civil servant and contractor employees |

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: |

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 (best estimate)**

|  |  |  |  |
| --- | --- | --- | --- |
| Category of respondent | Number of respondents, per year | Participation time  (list in minutes) | Total burden time (in hours) |
| Employee (either CS or CTR) | 50 | 10 | 8.3 |

8. **Federal cost** (If any, typically listed as the total burden time in hours x $30 = federal cost. This includes: printing, shipping, IT, contracting, and does not include salaries)

|  |
| --- |
| $0 |

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). | | |
| **If no**, please provide a description of how you plan to identify your potential group of respondents and how you will select them. Survey will be made available to all employees but voluntary to fill out and respond based on each individual’s need for childcare. | | |

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

|  |  |  |  |
| --- | --- | --- | --- |
| Web-based or email (SurveyMonkey, MS Forms, etc) | Telephone | In person | Snail mail |
| Other, please list: | | | |
| Will interviewers or facilitators be used? | | Yes | No |
| Please provide the URL: https://forms.office.com/g/FyACcZcYFb | | | |
| Will the information collection be secure on a NASA approved system? | | Yes | Other, explain |

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 not raise issues of concern to other federal agencies.  The results are not intended to be disseminated to the public.  Information gathered will not be used for the purpose of substantially informing influential 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 of Gov’t Civil Servant SME: Olivia Carte |
| Center, division, & program: NASA Armstrong Flight Research Center, AFRC-100, Center Director’s staff |

12. **Besides completing this fast-track form, return the following to the PRA Team:**

Please provide as Word files:

* Completed fast-track form
* Screenshots of your collection instrument
* Text of your collection instrument
* Include any transmittal email, or other mechanisms, that you plan to inform recipients with