

**Request for Approval under the “Generic Clearance for the Collection of  
Routine Customer Feedback” (OMB Control Number: 0970-0401)**

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**TITLE OF INFORMATION COLLECTION:** Feedback on the Office of Child Care’s  
School-Age Child Care Institute

**PURPOSE AND USE:** The Office of Child Care (OCC) hosts a bi-annual meeting for grantees focused on school-age child care. The purpose of the School-Age Child Care Institute is to share successful strategies and innovative practices to increase the supply and quality of school-age child care and to leverage opportunities within states and territories to support and coordinate services for children through age twelve.

The Child Care Communications Management Center (CMC) provides support for technical assistance to Child Care and Development Fund (CCDF) grantees. Specifically, CMC provides logistical and conference management services for national and regional child care technical assistance activities sponsored by OCC, including this School-Age Child Care Institute.

This request is to request feedback from participants in OCC’s School-Age Child Care Institute to inform future technical assistance offerings.

**DESCRIPTION OF RESPONDENTS:** Respondents will be CCDF lead agency staff and their partners who attend the School-Age Child Care Institute.

**TYPE OF COLLECTION:**

|                                                                        |                                                                  |
|------------------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> Customer Comment Card/Complaint Form          | <input checked="" 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 type="checkbox"/> 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 primary purpose of the results is not for public dissemination.
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 and affiliation: Stacy Cassell, Child Care Program Specialist, Office of Child Care

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

**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

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

**Gifts or Payments:**

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

**BURDEN HOURS**

| Information Collection                              | Category of Respondent         | No. of Respondents | No. of Responses per Respondent | Estimated Time per Response | Burden Hours |
|-----------------------------------------------------|--------------------------------|--------------------|---------------------------------|-----------------------------|--------------|
| OCC School-Age Child Care Institute Feedback Survey | State and Territory Government | 100                | 1                               | 10 minutes                  | 16.67        |

**FEDERAL COST:** The estimated annual cost to the Federal government is \$800.

**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?  
☒ 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?

We will send the survey to all who attend the School-Age Child Care Institute. Survey completion is optional. We expect about 100 attendees.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)  
☒ Web-based or other forms of Social Media  
☐ Telephone  
☐ In-person  
☐ Mail  
☐ Other, Explain
2. Will interviewers or facilitators be used? ☐ Yes ☒ No