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

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:

[] Customer Comment Card/Complaint Form	[X] Customer Satisfaction Survey
[] Usability Testing (e.g., Website or Software	[] Small Discussion Group
[] Focus Group	[] Other:
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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 <u>not</u> raise issues of concern to other federal agencies.
- 4. The primary purpose of the results is <u>not</u> for public dissemination.
- 5. Information gathered will not be used for the purpose of <u>substantially</u> informing <u>influential</u> 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 [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 [] No

3. If Yes, has an u	p-to-date System of R	ecords Notice (SC	ORN) been publishe	ed? [] Yes [] :	No		
Gifts or Payments Is an incentive (e.g. participants? [] Y	., money or reimburse	ment of expenses,	token of appreciati	on) provided to			
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 annu	al cost to the Fede	eral government is §	5800 <u>.</u>			
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							
the answer is no, pl	, please provide a des ease provide a descrip w you will select then	otion of how you p	•				
	rvey to all who attenc nal. We expect about		Child Care Institute	. Survey			
	ollect the information sed or other forms of ne n		apply)				
2. Will interviewe	rs or facilitators be us	ed? [] Yes [X] N	Vo				