

**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:** Personal Responsibility Education Program (PREP) Grantee Community and Youth Engagement Topical Training Feedback Survey

**PURPOSE:** The Family and Youth Services Bureau’s (FYSB) Personal Responsibility Education Program (PREP) grant recipients (State PREP, Tribal PREP, Competitive PREP, PREIS) are required to participate in a topical training to build their skills and capacity to deliver PREP programming to youth. The purpose of the proposed survey is to collect grant recipient feedback on this in-person PREP topical training, which will be conducted in November 2024. The survey is necessary to capture perspectives and experiences with the training. The information collected will enable us to improve the quality of trainings and will inform the development of future training and technical assistance opportunities, including topical trainings.

*PREP Grantee Topical Training Satisfaction Survey (Attachment A)*

The topical training survey will be administered in-person in a paper-based format. Participants will receive a paper survey at the end of the training and will have an opportunity to complete it before the training concludes. The survey includes multiple choice and open-ended questions and is estimated to take an average of 7 minutes to complete.

The contractor (RTI International) will perform analysis of the responses.

**DESCRIPTION OF RESPONDENTS:** Respondents are all PREP (State PREP, Tribal PREP, Competitive PREP, and PREIS).

**TYPE OF COLLECTION:** (Check one)

- |                                                                        |                                                                  |
|------------------------------------------------------------------------|------------------------------------------------------------------|
| <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 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: Resa Matthew, Director, Division of Data, Performance, and Policy

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

**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 **Not applicable**
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? ☐ Yes ☐ No **Not applicable**

**Tokens of Appreciation or Honoraria:**

Will a token of appreciation or honoraria be 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 |
|--------------------------------------|--------------------------|--------------------|---------------------------------|-----------------------------|--------------|
| PREP Grantee Topical Training Survey | Grantee (Private Sector) | 100                | 1                               | 7 min (0.12 hours)          | 12           |

**FEDERAL COST:** The estimated cost to the Federal government is \$ 11,030

| Item/Activity                                                                                           | Details                                        | \$ Amount    |
|---------------------------------------------------------------------------------------------------------|------------------------------------------------|--------------|
| FYSB oversight of contractor and project                                                                | 2.5% of FTE: GS-13 Program Specialist          | \$3          |
| Deployment of survey instrument, reminders to grantees for completion, analysis of results (Contractor) | Labor hours (1.5% of FTE for contractor staff) | \$8          |
| <b>Total</b>                                                                                            |                                                | <b>\$ 11</b> |

**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?  
☒ 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?**

There are currently 99 PREP grant recipients and two staff from all grant recipients are required to participate in at least one topical training annually. Each topical training has space accommodations for 100 staff of PREP grantees.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)  
☐ Web-based

- ☐ Telephone
- ☒ In-person
- ☐ Mail
- ☐ Other, Explain

2. Will interviewers or facilitators be used? ☐ Yes ☒ No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**

The survey instrument is attached along with this form as Attachment A.