

**Request for Approval under the “Generic Clearance for the Collection of  
Routine Customer Feedback” (OMB Control Number: 1545-1432)**

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**TITLE OF INFORMATION COLLECTION:** Enrolled Agent Special Enrollment  
Examination Survey

**PURPOSE:**

The IRS Return Preparer Office’s (RPO) mission is to improve taxpayer compliance by providing comprehensive oversight and support of tax professionals. The RPO oversees registration, testing, and suitability of Enrolled Agents (EA) and EA candidates. EAs, like attorneys and Certified Public Accountants (CPA), have unlimited practice rights to represent taxpayers before the IRS. This means they are unrestricted as to which taxpayers they can represent, what types of tax matters they can address, and which IRS offices they can represent taxpayers before.

The RPO’s Competency & Standards Department provides oversight of the Special Enrollment Examination (SEE) for EA candidates. The RPO entered into contract with Prometric, Inc. to develop and administer the SEE (contract number 2032H8-24-C-00008) beginning on February 7, 2024. A voluntary customer satisfaction survey offered at the end of the SEE will serve several purposes: it will allow RPO and Prometric to evaluate the candidate’s perception of the testing process to improve the candidate’s experience; the survey will allow the RPO to measure customer satisfaction to assist with evaluating Prometric’s performance consistent with contract requirements; and it will provide information on test center locations in relation to distance traveled which will be considered when new test centers are opened.

In addition to the objective of measuring customer satisfaction to meet contractual requirements, the RPO will use survey feedback to identify improvement opportunities and as the basis for enacting improvements. The goal of the survey is to obtain feedback on an ongoing basis to improve the examination and the candidate experience with Prometric’s website, call center, and test centers.

**DESCRIPTION OF RESPONDENTS:**

All SEE examinees will be offered the survey upon completion of the examination.

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

☐ Customer Comment Card/Complaint Form  
☐ Usability Testing (e.g., Website or Software)  
☐ Focus Group

☒ Customer Satisfaction Survey  
☐ Small Discussion Group  
☐ 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: \_\_\_\_\_

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

**Personally Identifiable Information:**

1. Is personally identifiable information (PII) collected? [ ] Yes [X] No
2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974? [ ] Yes [X] No
3. If Applicable, has a System or Records Notice been published? [ ] Yes [ X ] No

**Gifts or Payments:**

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

**BURDEN HOURS**

The customer satisfaction survey has been designed to minimize burden on respondents. The time that a respondent takes to complete the survey has been carefully considered and only the most important areas are being surveyed.

Approximately 20,000 examinations are administered annually. The customer satisfaction survey will be offered at the conclusion of each examination. The contact time to determine participants is estimated to be up to 1 minute to read the survey introduction screen. The burden hours would be 333 annually (20,000 x 1 minute / 60 = 333 hours). The average time to complete the survey is projected to be 3 minutes. Of the approximate 20,000 test takers, based on the prior year's participation rate, we estimate 77% will participate in the survey (20,000 x .77 = 15,400) leaving 4,600 non-participants. The burden hours would be 770 annually (15,400 x 3 minutes / 60 = 770 hours). The total burden hours for the survey would be 1,103 annually (333 + 770 = 1,103).

Category of Respondents	Participation	Response Time (Minutes)	Total Burden (Hours)
Potential Respondents	20,000	1	333
Expected Participants	15,400	3	770
Total Burden Hours			1,103

**Estimated Response Rate: 77%**

**Total Burden Estimate: 1,103 hours**

**FEDERAL COST:**

There is no cost to the Federal Government. As is required in the contract, Prometric has included all costs of administering the program in the fee they charge to examinees.

**STATISTICAL METHOD:**

**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?  
[ X ] 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?

The survey is offered to every customer at the conclusion of every exam. Prometric will capture the electronic survey results daily. Survey results will be housed in EasyServe, a vendor-owned secure reporting portal. The RPO will be able to access cumulative survey data for any date ranges or test center location number through the secure reporting portal. This data will not include any PII.

Additionally, Prometric will provide the RPO a written survey summary on a quarterly basis. The summary report will include an analysis of survey feedback and any recommendations to improve customer satisfaction with the testing process and service delivery program. The summary reports will include the beginning and ending dates of the survey period, the number of surveys offered, the number of survey responses received, the participation rate, and the survey results by question including the percentage of respondents that selected each multiple-choice response (for example, Question 1: 95.2 % very satisfied, 3.0% satisfied, 1.5% dissatisfied, .3% very dissatisfied). The summary report will not include any PII.

The RPO will regularly review survey data and will immediately address with Prometric any feedback indicating a problem, such as a problem with a test question or test center. The quarterly survey summary will be reviewed with Prometric and improvement opportunities will be addressed as appropriate.

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)  
[ X ] Web-based or other forms of Social Media

- ☐ Telephone
  - ☐ In-person
  - ☐ Mail
  - ☐ Other, Explain – Microsoft TEAMS or ZOOM for sharing visuals.
2. Will interviewers or facilitators be used? ☐ Yes ☒ No

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

## Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”

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**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

**PURPOSE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

**DESCRIPTION OF RESPONDENTS:** Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

**TYPE OF COLLECTION:** Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Provide answers to the questions.

**Gifts or Payments:** If you answer yes to the question, please describe the incentive and provide a justification for the amount.

### **BURDEN HOURS:**

**Category of Respondents:** Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected.

**No. of Respondents:** Provide an estimate of the Number of respondents.

**Participation Time:** Provide an estimate of the amount of time required for a respondent to participate (e.g., fill out a survey or participate in a focus group)

**Burden:** Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

**FEDERAL COST:** Provide an estimate of the annual cost to the Federal government.

**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.** Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

**Administration of the Instrument:** Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g., for surveys) or facilitators (e.g., for focus groups) used.