Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 0690-0030)

TITLE OF INFORMATION COLLECTION: Event (Training, Webinar, Presentation, Workshop) Participant Evaluation Form

PURPOSE: The National Oceanic & Atmospheric Administration is planning to evaluate performance to assess customer satisfaction with the format and content of training or workshop events (in-person training, webinars, presentations, workshops) as well as receive input on future training / workshop formats and content. The feedback from this evaluation will help NOAA measure effectiveness in meeting customer needs and make appropriate program changes based on evaluation results.

DESCRIPTION OF RESPONDENTS: Respondents include federal employees, contractors, affiliates, state, local, or tribal government employees, private industry, and non-profit organizations that attend training / workshop events.

TYPE OF COLLECTION: (Check one)

[ ] Customer Comment Card/Complaint Form
[ ] Usability Testing (e.g., Website or Software
[ ] Focus Group
[X] 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: _____Adrienne Thomas_____

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, 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 [X] No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden Hours
Individuals/Households	4800	15 min	1200
State, Local, or Tribal Gov't	1000	15 min	250
Private Sector	2000	15 min	500
Federal Gov't	300	15 min	75
Totals	**8100**		**2,025**

FEDERAL COST: The estimated annual cost to the Federal government is $5,088
This cost is based on a ZP-3 position using the CAPS Rest of U.S. Locality pay table at 3% effort.

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?

Training / workshop registration and mailing list information will be used to create the customer list. Only people who attended will be asked to provide feedback.

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

2. Will interviewers or facilitators be used? [ ] Yes [X] No

Required Additional Information

1. Line of Business: Natural Resources
2. Subfunction: Conservation, Marine, and Land Management
3. Privacy Act System of Records: Not applicable
4. Federal Registration citation information:
5. Number of respondents for small entities: 0
6. Percentage of respondents reporting electronically: 100%

Please submit all instruments, instructions, correspondences (emails, letters, etc.) to respondents, and scripts as separate documents along with this request document. Every instrument must have the following displayed –

OMB Control No. 0690-0030 and Expiration Date: 07/31/2026