

**Request for Approval under the “Generic Clearance Collection for Meetings, Events,
Registrations, and Miscellaneous Forms”
(OMB Control Number: 0690-0038)**

TITLE OF INFORMATION COLLECTION: Manufacturing USA Modern Makers

PURPOSE: NIST’s Office of Advanced Manufacturing has responsibility for overseeing the Manufacturing USA institutes funded by the National Institute of Standards and Technology (NIST). The office serves as the headquarters for the interagency Advanced Manufacturing National Program Office to coordinate Manufacturing USA, a network of manufacturing innovation institutes across the country that brings together industry, academia, and the public sector to advance American manufacturing. Manufacturing USA® is a national network created to secure U.S. global leadership in advanced manufacturing through large-scale public-private collaboration on technology, supply chain, and education and workforce development.

Nominations are being collected to support a Manufacturing USA network program called Modern Makers. Modern Makers are individuals whose sense of purpose embodies the Manufacturing USA mission to secure the future of U.S. manufacturing through innovation, education, and collaboration. The goal is to celebrate the inspirational yet relatable stories from college students to executives, who are at work in the U.S. manufacturing ecosystem at Manufacturing USA institutes and their member companies. By highlighting these individuals, the network supports people to identify potential career pathways within and consider a career in advanced manufacturing.

Nominations will be submitted from Manufacturing USA Institutes and their members through the use of a google form that is sent through email.

DESCRIPTION OF RESPONDENTS:

Respondents will be part of members of a Manufacturing USA Institute. This includes those that work within a manufacturing company and college or university students who are engaged in manufacturing education. The number of nominations will be capped at 200. Those selected as Modern Makers and agree to be part of the program will have their manufacturing story posted online on NIST’s public manufacturingusa.com website.

TYPE OF COLLECTION: (Check one)

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| ☐ Customer Comment Card/Complaint Form | ☐ Customer Satisfaction Survey |
| ☐ Usability Testing (e.g., Website or Software) | ☐ Small Discussion Group |
| ☐ Focus Group | ☒ Other: __Registering of Nominations |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is a 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: Elizabeth Reinhart

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
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

Category of Respondent	No. of Respondents	Participation Time	Burden Hours
Private sector individuals: Manufacturers	150	5 min	12.5
Private sector individuals: Educators	50	5 min	4.2
Totals	200	5 min	16.7

FEDERAL COST: The estimated annual cost to the Federal government is a week of staff time: \$7,500.

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 the respondents.

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 Google Form that will be emailed
2. Will interviewers or facilitators be used? ☐ Yes ☒ No

Required Additional Information

1. Line of Business: General Science and Innovation
2. Subfunction: Scientific and Technological Research and Innovation.
3. Privacy Act System of Records: DEPT-23, Information Collected Electronically in Connection with Department of Commerce Activities, Events, and Programs
4. Federal Registration citation information: 78 FR 42038
5. Number of respondents for small entities: Zero
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. 0690-0038 and Expiration Date: 07/31/2026

Instructions for completing Request for Approval under the “Generic Clearance Collection for Meetings, Events, Registrations, and Miscellaneous Forms”

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. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

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 per row.

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.

Submit all instruments, instructions, and scripts that are submitted with the request.