INSTRUCTIONS FOR COMPLETING SUPPORTING STATEMENT PART A

## INSTRUCTIONS / GUIDELINES:

1. You must provide an answer to each question. **N/A is not a sufficient response**. Please write your responses in paragraph form, using full sentences, and the standard text responses where applicable.
2. **If a standard text answer, denoted by (ST) and highlighted in blue, is applicable for your collection, please use it**. If you feel additional explanation is needed, please add to the standard response using full sentences.
3. Please delete all prompt text, which begins with (P) and is italicized, before submitting this document with your package for review.
4. Delete this instruction page before submitting this document with your package for review.

## KEY:

*TEXT IN ITALICS (P)–* Prompts provided to assist you in writing your responses. Once you have answered all of the questions in the prompts, please delete them and leave only your answers.

TEXT IN YELLOW - Edit as appropriate for your individual collection

STANDARD TEXT (ST) - If applicable to your collection, un-highlight and use as the response to that question. If not applicable to your collection, delete and write your own answer in full sentences.

SUPPORTING STATEMENT - PART A

Collection Title – OMB Control Number

|  |
| --- |
| Summary of Changes from Previously Approved Collection  *(P): In bullet form, highlight the key changes to the collection, if applicable. If the collection is new or there are no changes, OMIT this section. Examples of KEY changes include:*   * *Title of the collection* * *Revisions to instruments including adding new ICs, removing ICs or any major revisions to a previously approved IC (such as adding/removing SSN)* * *Changes in burden (e.g., increase, decrease, or complex calculations)* |

1. Need for the Information Collection (1-3 paragraphs)

*(P): Clearly and comprehensively explain the need for this information collection. List all of the authorities that authorize this collection, by their title and citation. If not evident, please explain how each authority relates to or necessitates this collection.*

*NOTE: If your authority or prescribing document for a collection is not at the level of U.S. Code, an Executive Order, or Public Law (i.e., a DoD Issuance or other internal policy document), you will need to include a copy of this authority with your package. If any of your authorities are at the level of U.S. Code, an Executive Order, or Public law, you are not required to submit a copy of your authorities with your package, regardless of the levels or types of other authorities.*

2. Use of the Information (2-4 paragraphs)

*(P): Clearly and thoroughly explain how the information collection is conducted, from beginning to end. When writing your response, please ensure that you describe:*

1. *Who the respondents are*
2. *Why they are responding to the information collection*
3. *Each collection instrument and its format*
4. *How the respondents are accessing the collection instrument*
5. *How they complete the collection instrument*
6. *How they return the completed collection instrument*
7. *Whether or not there are any invitations or other communications sent to the respondent associated with the information collection. If yes, please include copies of them with your package documents for OMB’s review.*
8. *How and by whom a completed collection instrument is handled or processed by once it’s returned by the respondent*
9. *The end result or successful effect of the information collection as a whole*
10. *Congressionally mandated surveys should reflect any changes made from the last approval (based on results, response rates etc). A copy of the last report sent to Congress (or otherwise generated from the survey) should be included as a supplementary document.*

3. Use of Information Technology (1-4 sentences)

*(P): Address the percentage of responses collected electronically (0-100%). Explain how this percentage of responses is collected electronically.*

*If the percentage or electronic submissions is less than 75%, please explain why a higher electronic submission rate is not possible and future plans to increase the electronic submission rate.*

*What steps have been taken, or planned, to increase the use of the information technology and electronic submissions?*

4. Non-duplication (1-2 sentences)

*(P): Is there information already available which can be used, or modified for use, for the purpose of this collection?*

*If yes, please explain why this collection is requiring already available information to be re-submitted by the respondent.*

*If no, please state (ST):* The information obtained through this collection is unique and is not already available for use or adaptation from another cleared source.

5. Burden on Small Businesses (1-2 sentences)

*(P): If any of the respondents are small businesses or other small entities, discuss efforts taken to minimize the burden imposed by this collection; i.e., developing separate or simplified requirements, etc.*

*If none or very few of the respondents are small businesses or other small entities, please state (ST):* This information collection does not impose a significant economic impact on a substantial number of small businesses or entities.

6. Less Frequent Collection (1-3 sentences)

*(P): Justify / explain the collection frequency (On occasion; as required, one time, weekly, monthly, quarterly, semi-annually, annually, biennially) and why this is the most infrequent collection interval possible without compromising the integrity of collection results and purpose. Explain what the consequences would be if the collection were conducted less frequently.*

*7.* Paperwork Reduction Act Guidelines (1 sentence)

*(P): Explain any special circumstances that require the collection to be conducted in a manner inconsistent with the guidelines delineated in 5 CFR 1320.5(d)(2), listed below:*

* *It is necessary for the proper performance of agency functions;*
* *It avoids unnecessary duplication;*
* *It reduces burden on small entities;*
* *It uses plain, coherent, and unambiguous language that is understandable to respondents;*
* *Its implementation will be consistent and compatible with current reporting and recordkeeping practices;*
* *It indicates the retention periods for recordkeeping requirements;*
* *It informs respondents of the information called for under 5 CFR 1320.8(b)(3) about:*
  + *Why the information is being collected;*
  + *Use of information;*
  + *Burden estimate;*
  + *Nature of response (voluntary, required for a benefit, or mandatory);*
  + *Nature and extent of confidentiality; and*
  + *Need to display currently valid OMB Control Number;*
* *It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected;*
* *If applicable, it uses effective and efficient statistical survey methodology; and*
* *It makes appropriate use of information technology.*

*If none of the above circumstances apply for your collection, please state (ST):* This collection of information does not require collection to be conducted in a manner inconsistent with the guidelines delineated in 5 CFR 1320.5(d)(2).

8. Consultation and Public Comments

Part A: PUBLIC NOTICE

A 60-Day Federal Register Notice (FRN) for the collection published on (Day of the Week, Month Day, Year). The 60-Day FRN citation is (volume number) FRN (Page number).

*(P): If you did not receive any comments on your 60-Day FRN, please state (ST):* No comments were received during the 60-Day Comment Period.

*(P): If you did receive comments on your 60-Day FRN, please state (ST):* (# of comments received) comments were received during the 60-Day Comment Period. They are included below in the order they were received, as well as our Agency’s response to the comment.

A 30-Day Federal Register Notice for the collection published on (Day of the Week, Month Day, Year). The 30-Day FRN citation is (volume number) FRN (Page number).

Part B: CONSULTATION (2-4 sentences)

(*P): Describe efforts made to consult with persons outside the sponsoring Agency or Component regarding availability of requested information, frequency of collection, clarity of instructions, etc. If there are circumstances that mitigate against consultation, explain.*

*NOTE: Consultation with respondents, or their representatives, should occur at least every 3 years, even if the information collection does not change.*

*If this is a new collection or a previously approved collection but no additional outside consultation was conducted, please state (ST):* No additional consultation apart from soliciting public comments through the Federal Register was conducted for this submission.

9. Gifts or Payment (1-3 sentences)

*(P): Are respondents receiving payments or gifts for responding to the information collection? If so, please list what they are and explain why payments or gifts are being offered?*

*NOTE: This does not include remuneration of contractors or grantees.*

*If respondents are receiving payments or gifts, you are required to consult with General Counsel.*

*If no gifts or payments are being offered to respondents, please state (ST):* No payments or gifts are being offered to respondents as an incentive to participate in the collection.

10. Confidentiality

*(P): Does the collection instrument require a Privacy Act Statement (PAS)?*

*If yes, please explain where it is located and how it is provided to the respondent.*

*If no, (ST):* A Privacy Act Statement is not required for this collection because we are not requesting individuals to furnish personal information for a system of records.

(P): *Does the information collection require a System of Record Notice (SORN)?*

*If yes and the SORN is currently published, please provide a link to the published SORN on DPCLTD’s website. (NOTE: This link should also be listed in any PAS provided.)*

*If yes and the SORN is not currently published or is being revised, include a draft copy with your package and state (ST):* A draft copy of the SORN (SORN ID Number and Title) has been provided with this package foFfr OMB’s review.

*If no, (ST):* A System of Record Notice (SORN) is not required for this collection because records are not retrievable by PII.

*(P): Does the information collection require a Privacy Impact Assessment (PIA)?*

*If yes, and the PIA is currently published, please provide a link to the published PIA.*

*If yes and the PIA is not currently published or is undergoing changes, please submit Sections 1 and 2 of the draft PIA with your package and state (ST):* A draft copy of the PIA, PIA title, has been provided with this package for OMB’s review.

*If no, (ST):* A Privacy Impact Assessment (PIA) is not required for this collection because PII is not being collected electronically.

*(P): State your Records Retention and Disposition Schedule. If you have a PIA and / or SORN, this should match verbatim the schedule listed in these documents.*

11. Sensitive Questions (1 paragraph)

*(P): Are you asking questions of a sensitive nature? Examples of sensitive question topics are:*

* *Sexual behavior or attitudes*
* *Religious beliefs*
* *Race and/or ethnicity*
* *Collection of Social Security Number (to include only the last four digits)*
* *Personal Financial / Banking Information*
* *Other matters usually considered private*

*(NOTE: Please consult with your IMCO to ensure that all sensitive questions are being asked in compliance with OMB’s current standards, especially race and ethnicity).*

*If sensitive questions are being asked, explain the necessity of asking these questions.*

*If Social Security Number is collected, include a Social Security Number Justification Memo as part of your package and mention it in your response here. To obtain a Social Security Number Justification Memo, talk with your Information Management Control Officer and your Privacy Officer. The acceptable uses for Social Security Number can be found in DoDI 1000.30.*

*If no, please state (ST):* No questions considered sensitive are being asked in this collection.

12. Respondent Burden and its Labor Costs

Part A: ESTIMATION OF RESPONDENT BURDEN

*(P): Repeat (using copy and paste) 1a-d for each collection instrument.*

*(P): If the same respondents are completing multiple instruments in a collection listed below, do not double count them in 12.a “Total Submission Burden” and 12.b. “Overall Labor Burden”.*

1. Collection Instrument(s)

[Collection Instrument Title]

1. Number of Respondents: #
2. Number of Responses Per Respondent: #
3. Number of Total Annual Responses: #
4. Response Time *(P: Amount of time needed to complete the collection instrument*): #
5. Respondent Burden Hours (*C multiplied by D, computed into hours*): # hours
6. Total Submission Burden (Summation or average based on collection)
   1. Total Number of Respondents *(P: add or average of all “a’s” in this section)*: #
   2. Total Number of Annual Responses (*P: add or average of all “c’s” in this section)*: #
   3. Total Respondent Burden Hours *(P: add all “e’s” in this section)*: # hours

Part B: LABOR COST OF RESPONDENT BURDEN

*(P): OMB believes that everyone’s time is worth money. In this section, we’re determining that if the respondent was working at their job, how much would they make in the time it takes them to respond to the collection instrument?*

*If respondents are salaried, and not hourly wage-earners, approximate the hourly wage as best as possible. For a good estimate, divide respondent salary by 52 weeks, then divide again by 40 hours to come up with a respondent hourly wage.*

1. Collection Instrument(s)

[Collection Instrument Title]

1. Number of Total Annual Responses: #
2. Response Time *(P: Amount of time needed to complete the collection instrument*): #
3. Respondent Hourly Wage: $X
4. Labor Burden per Response *(P: B multiplied by C)*: $X
5. Total Labor Burden *(P: A multiplied by B multiplied by C)*: $X
6. Overall Labor Burden
   1. Total Number of Annual Responses *(P: add all “a’s” in this section)*: #
   2. Total Labor Burden *(P: add all “e’s” in this section)*: $X

*(P): Cite the source for all wage information used. You may use* [*the Bureau of Labor Statistics website*](https://www.bls.gov/home.htm)*’s search function to find a specific job title. State (ST):* The Respondent hourly wage was determined by using the [Department of Labor Wage Website] ([<http://www.dol.gov/dol/topic/wages/index.htm>])

13. Respondent Costs Other Than Burden Hour Costs (1-4 sentences)

*(P): Provide an estimate of annualized costs to respondents other than the labor burden costs addressed in Item 12.*

* *Total capital and start-up costs annualized over the expected useful life of the item(s). Capital and start-up costs include the purchase of computers and software; testing equipment; and record storage facilities. For example, if respondents must purchase a computer software program to complete the collection, the costs for the program should go here.*
* *Total operation and maintenance costs. Take into account those costs associated with generating, maintaining, and disclosing or providing the information. O&M costs include such activities as contracting out for services and operational expenses. For example, if respondents must pay for* ***postage*** *to return the collection instrument, the costs for postage should go here.*

*If there are no respondent costs apart from burden associated with completing this collection, please state (ST):* There are no annualized costs to respondents other than the labor burden costs addressed in Section 12 of this document to complete this collection.

14. Cost to the Federal Government

Part A: LABOR COST TO THE FEDERAL GOVERNMENT

*(P): Repeat (using copy and paste) 1a-e for each collection instrument.*

1. Collection Instrument(s)

[Collection Instrument Title]

1. Number of Total Annual Responses: #
2. Processing Time per Response: # hours
3. Hourly Wage of Worker(s) Processing Responses : $X
4. Cost to Process Each Response *(P: B multiplied by C)*: $X
5. Total Cost to Process Responses *(P: A multiplied by D)*: $X
6. Overall Labor Burden to the Federal Government
   1. Total Number of Annual Responses *(P: add all “a’s” in this section)*: #
   2. Total Labor Burden *(P: add all “e’s” in this section):* $X

Part B: OPERATIONAL AND MAINTENANCE COSTS

*(P): To determine Operational and Maintenance Costs, think of the incidental or miscellaneous costs to owning this collection. How much does equipment, printing, or postage for this collection cost? Are there any overhead costs for purchasing or licensing software? If a database or system is involved, how much money does it take to maintain the system?*

*If you do have incur any Operational and Maintenance costs through this collection, please put “$0” next to each category.*

1. Cost Categories
   1. Equipment: $
   2. Printing: $
   3. Postage: $
   4. Software Purchases: $
   5. Licensing Costs: $
   6. Other: $
2. Total Operational and Maintenance Cost: (P: Add a) through f) in this section) $

Part C: TOTAL COST TO THE FEDERAL GOVERNMENT

1. Total Labor Cost to the Federal Government: $
2. Total Operational and Maintenance Costs: $
3. Total Cost to the Federal Government (P: Add 1 and 2 in this section): $

15. Reasons for Change in Burden (1-7 sentences)

*(P): Has there been a change in burden estimates since the last time this collection was approved? Why, or why not?*

*If there is no change (ST):*

There has been no change in burden since the last approval.

*If this is a new collection (ST):*

This is a new collection with a new associated burden.

*If this collection is in existence without OMB approval (ST):*

This is an existing collection currently in use without an OMB Control Number.

If this collection is a reinstatement (has expired) (ST):

This is a reinstatement with change to an expired collection. (Provide explanation).

*If the burden estimate has increased from the previous approval (ST)*:

The burden has increased since the previous approval due to (provide explanation).

*If the burden estimate has decreased from the previous approval (ST):*

The burden has decreased since the previous approval due to (provide explanation).

16. Publication of Results (1 sentence/ 1 paragraph)

*(P): Will the results of the information collection be published as a DoD publication or for a publication external to DoD?*

*If yes, please state so, as well as the name and projected date of publication, and why the results will be published.*

* *If the results of the information collection will be published for statistical use, outline plans for tabulation, statistical analyses, and publication, please provide the following:*
* *A timeline for the entire project including the beginning and ending dates of the actual collecting of information, estimated completion date of the report, and the publication date.*
* *Any other scheduled action pertaining to the publishing of the information collection.*

*If no, (ST):* The results of this information collection will not be published.

17. Non-Display of OMB Expiration Date (1 sentence/ 1 paragraph)

*(P): Are you requesting approval to omit the display of the expiration date of the OMB approval on the collection instrument?*

*If yes, please provide a justification for this request.*

*If no, (ST):* We are not seeking approval to omit the display of the expiration date of the OMB approval on the collection instrument.

18. Exceptions to “Certification for Paperwork Reduction Submissions” (1 sentence)

*(P): Are you asking for any exemptions to the provisions stated in 5 CFR 1320.9?*

*Unless you can demonstrate that these exceptions are necessary to satisfy statutory requirements, or other substantial need, OMB will not approve the collection of information.*

*If no (ST):* We are not requesting any exemptions to the provisions stated in 5 CFR 1320.9.