

Information Collection Approval Request

(Forms Management Use Only)
Form Number and Date

PRIVACY ACT STATEMENT

Authority: 44 U.S.C. Chapters 21, 29, 31, and 33; 41 CFR 102-194; 44 U.S.C. 3501 et seq.; 5 U.S.C. 552a; Public Law 105-277, Title XVII, Sections 1701 et seq.; Public Law 106-229; 29 U.S.C. 794d

Purpose: To collect, use, maintain, and disclose information to determine whether individuals are eligible to participate in the Forms Management Program.

Routine Uses: Information collected from various United States Agency for International Development (USAID) forms will be maintained by M/MS/IRD and shared with Agency officials who need to review the information to make determinations on information collection requests.

Disclosure: Disclosure is voluntary for personal information but failure to provide certain information may result in the denial of your application.

INSTRUCTIONS: Complete this form and attach a final copy of the proposed form, survey, or questionnaire in Adobe Portable Document Format (PDF). Include any proposed directives, written procedures covering the form (if applicable) or instructions governing the use of the form. If the form collects Personally Identifiable Information (PII), include a Privacy Act Statement. **Please Note**: All forms must be Section 508 compliant. Sign and submit your request to the Information and Records Division (M/MS/IRD) at formsreviewteams@usaid.gov (See ADS Chapter 505, Forms Management Program for more information.)

To Be Completed by Requiring Office

- 1. Requiring Office (Bureau/Independent Office/Mission)
- 2. **Contact** (Person Authorized to Update Form)
- 3. Office Location (Building/Room Number)
- 4. Phone Number
- 5. Indicate Method of Collection Form Survey/Questionnaire Website
- 6. Collection Title Name



7.	Intended Audience * Required (Select All That Apply)						
	USAID/W	Mission	Implemen	ting Partners	Members of	the Public	
8.	8. Explain the Purpose for the Collection						
9. Has the collection been submitted to Privacy and Section 508 for review? *							
	* Required	Yes	No				
Forms Only							
10	. Type of Colle	ction	New	Revised	Replaced	Cancelled/Removed	
	Reinstated	One-time	Use/Tempo	rary (Estimate	d Time for Use)	
11. ADS Reference Number (*Required for New, One-Time Use/Temporary Collections)							
12. Current Form Number (*Required for Revised, Replaced, Reinstated, and Deleted Collections)							
13	. Explain Reaso	on for Chan	ige (For Rev	ised or Replac	ed Forms Only)		
14	l. Request for I	Deletion	Yes * (If Ye	es, Complete t	he Section Belov	w) No	
I5. Date to Delete/Remove							
Justification for the Cancellation/Deletion of Form (Provide a Brief Explanation for the Deletion.)							
Survey/Questionnaire Only							
16	. How often wi	ill the Surve	ey/Question	nnaire be use	ed? Annual	Bi-Annual	
	One-time Use	e Ot	ther				



Additional Requirements

- 17.OMB Number and Expiration Date (mm/dd/yyyy) (If Applicable)
- 18. Other Control Number(s)

Clearance

- 19a. Name and Title of Clearance Officer
- 19b. Signature *(Include Date (mm/dd/yyyy) Only if Signed Manually)



INSTRUCTIONS FOR COMPLETING AID 505-1

- SECTION I Office that initiates the form approval request.
- SECTION 2 Enter the name of the person M/MS/IRD will consult with in the requiring office on matters concerning the proposed or revised form.
- SECTION 3 & 4 Provide office location (USAID building and room number) and phone number for the contact person.
- SECTION 5 Select the method in which the collection will be gathered.

SECTION 6 - The use of titles should be built around a keyword, which helps to identify a collection and indicates its function, for example:

Keyword	Purpose of Form
Abstract	to make a summary of
Agreement	to offer and accept in writing
Application	to request something
Authorization	to permit an action
Certificate	to verify the truth of
Report	to make an account of action or status
Request	to ask for
Statement	to join a declaration or report

- SECTION 7 Indicate who you are collecting data from.
- SECTION 8 Explain the purpose for the collection of information.
- SECTION 9 Indicate if collection (form/survey) has been sent to Privacy and Section 508 for review and approval.
- SECTION 10 Indicate the collection status type submitted.
- SECTION II Enter the ADS Chapter and section which cites the use of the required form. If required by internal instruction, enter the title of the document.
- SECTION 12 Provide the form number assigned to the previous collection/form (revisions and replacements only).
- SECTION 13 Explain the reason for the change to the form/collection of information.
- SECTION 14 Indicate if the form is being deleted and provide justification for the deletion in section 15.



- SECTION 15 Enter the preferred date of deletion/cancellation for the form.
- SECTION 16 Indicate how often the survey/collection will be used per year.
- SECTION 17 Provide any other assigned control numbers (if applicable).
- SECTION 18 Provide current OBM number assigned by the Office of Management and Budget along with the expiration date (if applicable).
- SECTION 19 Enter the name and title of the person authorizing the creation and use of the form (e.g., Head of Office, Project Lead, etc.); obtain his or her signature.