#### SUPPLEMENTARY INFORMATION:

Titles

a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG.

b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC.

c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO.

d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN.

e. Compliance Reports for Per Diem and Special Needs Grants. No form needed. May be reported to VA in standard business narrative.

f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA.

g. Compliance Reports for Technical Assistance Grants. No form needed. May be reported to VA in standard business narrative.

OMB Control Number: 2900–0554. Type of Review: Extension of a currently approved collection. Abstract: The information collected

on VA Form 10-0361 series. Homeless Providers Grant and Per Diem Program, will be used to determine applicants eligibility to receive a grant/or per diem payments which provide supportive housing/services to assist homeless veterans transition to independent living. The collected information will be used to apply the specific criteria to rate and rank each application; and to obtain information necessary to ensure that Federal funds are awarded to applicants who are financially stable and who will conduct program for which a grant and/ or per diem award was made. If this data were not collected, VA would not be able to implement the provisions of Public Law 107-95.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** notice with a 60-day comment period soliciting comments on this collection of information was published on May 30, 2003, at pages 32582–32583.

Estimated Annual Burden: 14,340 hours.

- a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG— 3,500 hours.
- b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC— 2,000 hours.
- c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO— 3,000 hours.

- d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN— 4,000 hours.
- e. Compliance Reports for Per Diem and Special Needs Grants—1,500 hours.
- f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA— 250 hours.
- g. Compliance Reports for Technical Assistance Grants—90 hours.

Estimated Average Burden Per Respondent:

- a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG—35 hours.
- b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC— 10 hours.
- c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO— 20 hours.
- d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN—20 hours
- e. Compliance Reports for Per Diem and Special Needs Grants—5 hours.
- f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA—10 hours.
- g. Compliance Reports for Technical Assistance Grants—2.25 hours.

Frequency of Response: On occasion.
Estimated Number of Respondents:
1,015.

- a. Homeless Providers Grant and Per Diem Program, Capital Grant Application, VA Form 10–0361–CG— 100.
- b. Homeless Providers Grant and Per Diem Program, Life Safety Code Application, VA Form 10–0361–LSC— 200.
- c. Homeless Providers Grant and Per Diem Program, Per Diem Only Application, VA Form 10–0361–PDO— 150.
- d. Homeless Providers Grant and Per Diem Program, Special Needs Application, VA Form 10–0361–SN— 200.
- e. Compliance Reports for Per Diem and Special Needs Grants—300.
- f. Homeless Providers Grant and Per Diem Program, Technical Assistance Application, VA Form 10–0361–TA— 25.
- g. Compliance Reports for Technical Assistance Grants—40.

Dated: August 15, 2003.

By direction of the Secretary:

#### Jacqueline Parks,

IT Specialist, Records Management Service. [FR Doc. 03–22404 Filed 9–2–03; 8:45 am] BILLING CODE 8320–01–P

# DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0427]

## Agency Information Collection Activities Under OMB Review

**AGENCY:** Veterans Health Administration, Department of Veterans Affairs.

**ACTION:** Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21), this notice announces that the Veterans Health Administration (VHA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before October 3, 2003.

# FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT: Denise McLamb, Records Management Service (005E3), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 273–8030, FAX (202) 273–5981 or e-mail to: denise.mclamb@mail.va.gov. Please refer to "OMB Control No. 2900–0427."

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503, (202) 395–7316. Please refer to "OMB Control No. 2900–0427" in any correspondence.

### SUPPLEMENTARY INFORMATION:

Title and Form Number: Former POW Medical History, VA Form 10–0048.

OMB Control Number: 2900–0427.

Type of Review: Extension of a currently approved collection.

Abstract: VA Form 10–0048 will be used to collect data in response to Public Law 97–37 that liberalizes eligibility requirements and extends the existing benefits. The form is completed by veterans and submitted to a VA physician during a medical examination. Without this information VA physician would be unable to assess

the health care, disability compensation or rehabilitation needs of Former Prisoners of War.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on June 3, 2003, at page 33230.

Affected Public: Individuals or households.

Estimated Total Annual Burden: 1,575 hours.

Estimated Average Burden Per Respondent: 90 minutes.

Frequency of Response: One time. Estimated Number of Respondents: 1,050.

Dated: August 15, 2003. By direction of the Secretary.

### Jacqueline Parks,

IT Specialist, Records Management Service.
[FR Doc. 03–22405 Filed 9–2–03; 8:45 am]
BILLING CODE 8320–01–P

# DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0034]

## Agency Information Collection Activities Under OMB Review

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before October 3, 2003.

# FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT: Denise

McLamb, Records Management Service (005E3), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 273–8030, FAX (202) 273–5981 or e-mail: denise.mclamb@mail.va.gov. Please refer to "OMB Control No. 2900–0034."

Send comments and recommendations concerning any

aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503, (202) 395–7316. Please refer to "OMB Control No. 2900–0034" in any correspondence.

## SUPPLEMENTARY INFORMATION:

Title: Trainee Request for Leave—Chapter 31, Title 38, U.S.C., VA Form 28–1905h.

OMB Control Number: 2900-0034.

Type of Review: Extension of a currently approved collection.

Abstract: VA Form 28-1905h is used to request leave and to provide the necessary information to determine whether to approve a trainee request for leave from Vocational Rehabilitation and Employment Program. A trainer or authorized school official must verify on the form the effect the absence will have on the veteran's progress in the program. Upon approval, the veteran can receive subsistence allowance and other program services during the leave period as if he or she were attending training. Disapproval of the request may result in loss of subsistence allowance for the leave period. Failure to collect the information would create the potential for substantial abuse through receipt of benefits for unauthorized absences.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on June 3, 2003, at page 33226.

Affected Public: Individuals or households.

Estimated Annual Burden: 7,500 hours.

Estimated Average Burden Per Respondent: 15 minutes.

Frequency of Response: On occasion.
Estimated Number of Respondents:

Dated: August 21, 2003. By direction of the Secretary.

# Denise McLamb

30,000.

Program Analyst, Records Management Service.

[FR Doc. 03–22406 Filed 9–2–03; 8:45 am]
BILLING CODE 8320–01–P

# DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0113]

## Agency Information Collection Activities Under OMB Review

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

SUMMARY: In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501–21), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before October 3, 2003.

FOR FURTHER INFORMATION OR A COPY OF THE SUBMISSION CONTACT: Denise McLamb, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 273–8030 or FAX (202) 273–5981 or e-mail: denise.mclamb@mail.va.gov. Please refer to "OMB Control No. 2900–0113."

Send comments and recommendations concerning any aspect of the information collection to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395–7316. Please refer to "OMB Control No. 2900–0564" in any correspondence.

# SUPPLEMENTARY INFORMATION:

Title: Application for Fee Personnel Designation, VA Form 26–6681. OMB Control Number: 2900–0113. Type of Review: Extension of a currently approved collection.

Abstract: The form solicits information on the fee personnel applicant's background and experience in the real estate valuation field. VA regional offices and centers use the information contained on the form to evaluate applicants' experience for the purpose of designating qualified individuals to serve on the fee roster for their stations.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period