

II. Award Information

1. Funding Instrument Type: Cooperative Agreement.
2. Anticipated Total Priority Area Funding Per Budget Period: AoA intends to make available, under this program announcement, cooperative agreements for up to eight (8) projects, with eighteen (18) month project periods, at a federal share up to \$400,000 with most awardees expected to receive \$250,000.

III. Eligibility Criteria and Other Requirements

1. Eligible Applicants

This is a limited grant competition. Eligibility for grant awards is limited to agencies of State Government including, but not limited to, current ADDGS grantees.

2. Cost Sharing or Matching

Under this program, AoA will fund no more than 75 percent of the project's total cost. Grantees are required to provide at least 25 percent of the total program costs from non-federal cash or in-kind resources in order to be considered for the award.

3. DUNS Number

[All grant applicants must obtain a D-U-N-S number from Dun and Bradstreet. It is a nine-digit identification number, which provides unique identifiers of single business entities. The D-U-N-S number is free and easy to obtain from http://www.dnb.com/US/duns_update/]

4. Intergovernmental Review

Executive Order 12372, Intergovernmental Review of Federal Programs, is not applicable to these grant applications.

IV. Application and Submission Information

Address to Request Application

Application materials are available online at <http://www.grants.gov>.

1. Submission Requirements

Applications must be submitted electronically to <http://www.grants.gov>. In order to be able to submit the application; you must register in the Central Contractor Registry (CCR) database. Information about CCR is available at <http://www.grants.gov/CCRRegister>.

2. Submission Dates and Times

To receive consideration, applications must be submitted electronically by midnight, Eastern time, August 28, 2007.

V. Responsiveness Criteria

Each application submitted will be screened to determine whether it was received by the closing date and time.

Applications received by the closing date and time will be screened for completeness and conformity with the requirements outlined in Sections III and IV of this Notice and the Program Announcement. Only complete applications that meet these requirements will be reviewed and evaluated competitively.

VI. Application Review Information

Eligible applications in response to this announcement will be reviewed according to the following evaluation criteria: Purpose and Need for Assistance (15 points); Approach/Method—Workplan and Activities (40 points); Outcomes/Benefits/Impacts (25 points); and Level of Effort, Program Management, Organizational Capacity (20 points).

VII. Agency Contacts

Direct inquiries regarding programmatic issues to U.S. Department of Health and Human Services, Administration on Aging, Office of Community-Based Services, Washington, DC 20201, telephone: 202-357-3452.

Dated: July 10, 2007.

Josefina G. Carbonell,

Assistant Secretary for Aging.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-07-0028]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Evaluation of Customer Satisfaction with the Agency for Toxic Substances and Disease Registry Internet Home Page and Links (OMB No. 0923-0028)—Reinstatement—Agency for Toxic Substances and Disease Registry (ATSDR), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

ATSDR's mandate under the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA), as amended, is to assess the presence and nature of health hazards at specific Superfund sites. ATSDR considers evaluation to be a critical component for enhancing program effectiveness and improving resource management. Furthermore, in accordance with the Government Performance and Results Act of 1993 (Pub. L. 103-62), the e-Government Act of 2002 and the Federal Enterprise Architecture are key elements of the President's Management Agenda. These "e-government" initiatives have charged staff at all levels of the federal government with the improvement of program effectiveness and public accountability by promoting new focuses on results, service quality, and customer satisfaction. Federal agencies are further charged with the responsibility to articulate clearly the results of their programs in terms that are understandable to their customers, their stakeholders, and the American taxpayer. The proposed data collection addresses these concerns and serves to improve ATSDR's health promotion agenda by providing data on which to assess and improve the usefulness and usability of information provided via ATSDR's Internet-based Home Page and Links. ATSDR has designed its Internet site to serve the general public, persons at risk for exposure to hazardous substances, collaborating organizations, state and local governments, and health professionals. As a "Support Delivery of Services" tool, the ATSDR Web site presents information focused on prevention of exposure and adverse human health effects and diminished quality of life associated with exposure to hazardous substances from waste sites, unplanned releases, and other sources of pollution present in the environment. Furthermore, the ATSDR Web site advances the Agency's health promotion messages, product outreach activities, and future survey options currently under consideration. Therefore, it is critical that ATSDR have the capacity to answer whether or not

these activities elicit the desired effects or impact.

ATSDR is requesting a reinstatement with minor changes for the following customer satisfaction surveys:

- ATSDR Web Site User Satisfaction Survey (WSUS)
- Toxicological Profiles User Satisfaction Survey (TPUS)
- ToxFAQs™ User Satisfaction Survey (TFUS)
- Public Health Statements User Satisfaction Survey (PHSUS)

- Toxicology Curriculum for Communities Training Manual User Satisfaction Survey (TCCUS)
- ToxProfiles™ CD-ROM User Satisfaction Survey (TP-CDUS)

The results of this project will ensure that these audiences will continue to find our knowledge products and informational pieces easy to access, clear, informative and useful. Specifically, this project will continue to examine whether current and future informational updates are presented in

an appropriate technological format and whether they meet the needs, wants, and preferences of visitors to the ATSDR Web site. The survey questions have been held to the absolute minimum required for the use of the data.

This extension request is for a three-year period. There are no costs to the respondents other than their time. The total estimated annualized burden hours are 166.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
ATSDR Web site Visitors	WSUS	1000	1	5/60
	TPUS	300	1	5/60
	TFUS	300	1	5/60
	PHSUS	100	1	5/60
	TCCUS	160	1	5/60
	TP-CDUS	140	1	5/60

Dated: July 9, 2007.

Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-07-0274]

Agency Forms Undergoing Paperwork Reduction Act Review

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comments should be received within 30 days of this notice.

Proposed Project

CDC Model Performance Evaluation Program (MPEP) (0920-0274)—Revision—National Center for Preparedness, Detection, and Control of Infectious Diseases (proposed) (NCPDCID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

CDC is requesting OMB approval of a revision to its data collection, the CDC Model Performance Evaluation Program (MPEP). CDC originally implemented MPEP in 1986 to evaluate the performance of laboratories conducting testing to detect human immunodeficiency virus type 1 (HIV-1) antibody (Ab). CDC is requesting a 3-year approval for this data collection.

In this program, respondents receive 2 shipments of specimens per year. Respondents test the specimens in their laboratory/testing site and report their results either using a report booklet or on-line. CDC provides the respondent with a report containing the analysis of the laboratory test results reported to CDC. Participation in this program is

voluntary and provides the respondents an opportunity to (1) assure accurate tests are being provided by the laboratory/testing site through external quality assessment; (2) improve testing quality through self-evaluation in a non-regulatory environment; (3) test well characterized samples from a source outside the test kit manufacturer; (4) discover potential testing problems so that procedures can be adjusted to eliminate them; (5) compare of testing results with others at a national and international level; and (6) consult with CDC staff to discuss testing issues.

In this request, CDC proposes to make the following revisions to the currently approved data collection:

- Addition of a Name and Address change form to report changes for the MPEP manager and coordinator at the respondent laboratory;
- Inclusion of additional test kit manufacturers approved by the FDA since previous OMB approval; and
- Elimination of reporting HIV-1 RNA Viral Load and CD4+ T-cell determinations.

There are no costs to the respondents other than their time to complete the survey. The total estimated annualized burden hours are 257.

TOTAL ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
New Enrollees	100	1	3/60
Laboratory Change Form	20	1	3/60