

ANNUAL BURDEN ESTIMATES—Continued

| Respondents and activities   | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|--|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Head Start Teachers: Participate in Refresher Training on Social-Emotional Development Ratings ..... | 38,500                | 1                                  | 1/2                               | 19,250             |
| Head Start Teachers: Complete Social-Emotional Development Ratings .....                             | 38,500                | 11                                 | 1/6                               | 70,583             |
| Head Start Teachers: Complete Child Health Questions .....   | 38,500                | 11                                 | 1/12                              | 35,292             |
| Head Start Staff: Complete Health and Safety of Program Questions .....                              | 1,800                 | 1                                  | 1/12                              | 150                |
| Head Start Staff: Enter Information on CBRS .....  | 1,800                 | 1                                  | 3/2                               | 2,700              |
| Head Start Staff: Provide feedback on Computer-Assisted Child Assessments and PDA Answer Forms ..... | 220                   | 1                                  | 1/12                              | 18                 |
| <b>Total Annual Burden Estimates</b> .....   |                       |                                    |                                   | <b>919,976</b>     |

Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov).

**OMB Comment:**

OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of

Management and Budget Paperwork Reduction Project Attn: Desk Officer for ACF E-mail address: [Katherin\\_T\\_Astrich@omb.eop.gov](mailto:Katherin_T_Astrich@omb.eop.gov).

Dated: April 16, 2006.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 06-3524 Filed 4-12-06; 8:45 am]  
**BILLING CODE 4184-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Financial Status Reporting Form for the Program of State Council on Developmental Disabilities.

OMB No.: 0980-0212.

*Description:* For the program of the State Council on Developmental Disabilities, funds are awarded to State agencies contingent on fiscal requirements in subtitle B of the Developmental Disabilities Assistance and Bill of Rights Act. The SF-269, ordinarily mandated in the revised OMB Circular A-102, provides no accounting breakouts necessary for proper stewardship. Consequently, the proposed streamlined form will substitute for the SF-269 and will allow compliance monitoring and proactive compliance maintenance and technical assistance.

*Respondents:* State Councils and Designated State Agencies.

ANNUAL BURDEN ESTIMATES

| Instrument   | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|--|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Financial Status Reporting Form for program of State Council on Developmental Disabilities ..... | 55                    | 1                                  | 8                                 | 440                |
| Estimated Total Annual Burden Hours: 440   |                       |                                    |                                   |                    |

*Additional Information:* Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov).

**OMB Comment:** OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of

having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Attn: Desk Officer for ACF, E-mail address: [Katherine\\_T\\_Astrich@omb.eop.gov](mailto:Katherine_T_Astrich@omb.eop.gov).

Dated: April 6, 2006.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 06-3525 Filed 4-12-06; 8:45 am]  
**BILLING CODE 4184-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. 2005N-0364]

**Stakeholder Meeting to Discuss the Possible Implementation of Two Review Performance Goals Referenced in the Medical Device User Fee and Modernization Act of 2002; Public Meeting**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice of public meeting.