

September 9, 1998) clarifying disclosure requirements with respect to an exception to the minimum length of stay requirement.

**Pauline Perrow,**

*Acting Department Clearance Officer.*

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**DEPARTMENT OF LABOR**

**Office of the Secretary**

**Submission for OMB Review; Comment Request**

March 25, 1999.

The Department of Labor (DOL) has submitted the following public information collection requests (ICRs) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13, 44 U.S.C. Chapter 35). A copy of each individual ICR, with applicable supporting documentation, may be obtained by calling the Department of Labor, Departmental Clearance Officer, Pauline Perrow (202) 219-5096, ext. 143), or by E-Mail to Perrow-Pauline@dol.gov.

Comments should be sent to Office of Information and Regulatory Affairs, Attn: OMB Desk Officers for BLS, DM,

ESA, ETA, MSHA, OSHA, PWBA, or VETS, Office of Management and Budget, Room 10235, Washington, DC 20503 (202) 395-7316), on or before May 3, 1999.

OMB is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility, and clarity of the information to be collected; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronics submission of responses.

*Agency:* Employment Standards Administration.

*Title:* Claim for Continuance of Compensation.

*OMB Number:* 1215-0154 (Extension).

*Frequency:* Annually.

*Affected Public:* Individuals or households.

*Number of Respondents:* 6,054.

*Estimated Time Per Respondent:* 1/12 of an hour.

*Total Burden Hours:* 505.

*Total Annualized capital/startup costs:* 0.

*Total annual costs (operating/maintaining systems or purchasing services):* \$2,000.

*Description:* This form is used to obtain information on marital status of beneficiaries in death cases, in order to determine continued entitlement to benefits under the provisions of the Federal Employees' Compensation Act. The information provided is used by OWCP claims examiners to ensure that death benefits being paid are correct, and that payments are not made to ineligible survivors.

*Agency:* Employment Standards Administration.

*Title:* (1) Miner's Claim for Benefits Under the Black Lung Benefits Act; (2) Employment History; (3) Miner Reimbursement Form.

*OMB Number:* 1215-0052 (Extension).

*Frequency:* On-occasion.

*Affected Public:* Individuals or households; Business or other for-profit.

*Number of Respondents:* 20,200.

*Estimated Time Per Respondent:*

	Minutes	Respondents	Hours
CM-911	45	4,800	3,600
CM-911a	40	5,900	3,933
CM-915	10	9,500	1,583

*Total Burden Hours:* 9,116.

*Total Annualized capital/startup costs:* 0.

*Total annual costs (operating/maintaining systems or purchasing services):* \$4,000.

*Description:* CM-911 A miner who applies for black lung benefits must complete the CM-911 (applicant form). The completed form gives basic identifying information about the applicant, the years of coal mine employment, dependents, earned income and income received from state workers' compensation as a result of pneumoconiosis.

CM-915 of the standard data collection form completed by miner payees when requesting reimbursement for black lung related medical services that are covered under the program. Miner payees, i.e., miners, authorized survivors and representatives, are entitled to reimbursement for out-of-pocket medical expenses incurred as a

result of treatment for a black lung related condition.

CM-915 provides a systematic approach for gathering data essential to processing miner submitted medical bills in accordance with the program objectives.

*Agency:* Employment Standards Administration.

*Title:* Pre-Hearing Statement.

*OMB Number:* 1215-0085 (Extension).

*Frequency:* On Occasion.

*Affected Public:* Individuals or households; Business or other for-profit.

*Number of Respondents:* 6,800.

*Estimated Time Per Respondent:* 10 minutes.

*Total Burden Hours:* 1,088.

*Total Annualized capital/startup costs:* 0.

*Total annual costs (operating/maintaining systems or purchasing services):* \$2,500.

*Description:* This form is used to refer cases for formal hearings under the Act. The information obtained is used to

establish and clarify the issues involved. The information is used by OWCP district offices to prepare cases for hearing.

*Agency:* Employment Standards Administration.

*Title:* Overpayment Recover Questionnaire.

*OMB Number:* 1215-0144 (Extension).

*Frequency:* On-Occasion.

*Affected Public:* Individuals or households.

*Number of Respondents:* 4,500.

*Estimated Time Per Respondent:* one hour each.

*Total Burden Hours:* 4,500 (FECA: 3,500 and Black Lung 1,000).

*Total Annualized capital/startup costs:* 0.

*Total annual costs (operating/maintaining systems or purchasing services):* 2,000.

*Description:* The information on this form is used by OWCP examiners to ascertain the financial condition of the beneficiary to see if the overpayment or

any part can be recovered; to identify the possible concealment or improper transfer of assets; and to identify and consider present and potential income and current assets for enforced collection proceedings.

*Agency:* Employment Standards Administration.  
*Title:* Applications to Employ Special Industrial Home workers and Workers with Disabilities.  
*OMB Number:* 1215-0005 (Extension).  
*Frequency:* On-Occasion.

*Affected Public:* Individuals of households; Business or other for profit; Not-for-Profit institutions; Farms; State, Local, or Tribal Government.  
*Number of Respondents:* 8,600.  
*Estimated Time Per Respondent:*

	Minutes	Respondents
WH-2	30	100
WH-226-MIS	45	8,500
WH-226A-MIS	45	*8,500

\*A total of 20,000 copies of this form will be completed by 8,500 respondents.

*Total Burden Hours:* 21,425.  
*Total Annualized capital/startup costs:* 0.

*Total annual costs (operating/maintaining systems or purchasing services):* 3,000.

*Description:* The WH-2 is used by employers to obtain certificates to employ individual Home workers in one of the restricted homework industries: knitted outerwear, women's apparel, jewelry manufacturing, gloves and mittens, button and buckle manufacturing, handkerchief manufacturing and embroideries. Upon application by the home worker and the employer, certificates may be issued to the employer authorizing employment of an individual home worker, provided it is shown that the worker is unable to adjust to factory work because of age and physical or mental disability or is unable to leave home because the worker is required to care for an invalid in the home . . . etc.

The WH-226 and the supplemental data form WH-226A-MIS are used by employers to obtain authorization to employ workers with disabilities in competitive employment, in sheltered workshops, and in hospitals or institutions at subminimum wages which are commensurate with those paid to nondisabled workers.

**Pauline D. Perrow,**  
*Acting Departmental Clearance Officer.*  
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**DEPARTMENT OF LABOR**

**Employment and Training Administration**

**Job Training Partnership Act, Title III, Demonstration Program: Contextual Learning Demonstration Program**

**AGENCY:** Employment and Training Administration, Labor.

**ACTION:** Notice of Availability of Funds and Solicitation for Grant Applications (SGA).

**SUMMARY:** The U.S. Department of Labor (DOL), Employment and Training Administration (ETA), announces a demonstration program to test the viability of innovative training strategies in reducing the time required for individuals with low basic skills to develop the skills needed to qualify for quality jobs in occupations and industry settings with long-term growth potential. This demonstration program is targeting workers who have been dislocated from declining industries and who have not only non-transferrable, obsolete job skills, but also low basic skills. This demonstration program has two special emphases: The use of contextual learning strategies to develop basic literacy skills in conjunction with the development of vocational skills, and strategies to develop such skills with limited-English-speaking populations.

The program will be funded with Secretary's National Reserve funds appropriated for Title III of the Job Training Partnership Act (JTPA) and administered in accordance with 29 CFR part 95 and 97 as applicable.

This notice describes the application submission requirements, the process that eligible entities must use to apply for funds covered by this solicitation, how grantees are to be selected, and the responsibilities of grantees. It is anticipated that up to \$10 million will be available for funding the projects covered by this solicitation, that seven to twelve projects will be selected for funding, and that the maximum grant award will not exceed \$1 million.

All information required to submit a grant application under this solicitation is contained in this announcement.

**DATES:** The closing date for receipt of applications is May 10, 1999 at 2 p.m. (Eastern Time) at the address below. Except as provided below, grant

applications received after this date and time will not be considered.

**ADDRESSES:** Applications shall be mailed to: U.S. Department of Labor; Employment and Training Administration; Division of Federal Assistance; Attention: Willie E. Harris, Reference: SGA/DAA 99-008; 200 Constitution Avenue, NW, Room S-4203; Washington, DC 20210.

**FOR FURTHER INFORMATION CONTACT:** Mr. Willie E. Harris, Division of Federal Assistance. Telephone (202) 219-8706, extension 119 (this is not a toll-free number). Questions may also be faxed to Mr. Willie E. Harris, Grant Management Specialist, Fax Number: (202) 219-8739. All inquiries sent via fax should include the SGA number (DFA 99-008) and a contact name and phone number.

**SUPPLEMENTARY INFORMATION:**

This announcement consists of five parts. Part I describes the authorities and purpose of the demonstration program and identifies demonstration policy. Part II describes the application process and provides guidelines for use in applying for demonstration grants. There is no separate application package. Part III includes the Government Requirement/Statement of Work for the demonstration projects. Part IV describes the selection process, including the criteria that will be used in reviewing and evaluating applications. Part V describes the grantee's responsibilities related to program monitoring, reporting and evaluation.

**Part I. Background**

*A. Authorities*

Section 323 of JTPA (29 U.S.C. 1662b) authorizes the use for demonstration programs of funds reserved under section 302 of JTPA (29 U.S.C. 1652) and provided by the Secretary for that purpose under section 322 of JTPA (29 U.S.C. 1662a). Demonstration program grantees shall comply with all applicable federal and state laws and