

input includes the following elements: (1) Corporate and worker liaison committees and a broader-based stakeholders outreach committee will assist NIOSH in obtaining involvement and input from employers, employees, health officials, health professionals, scientists, and public health, advocacy, scientific, industry and labor organizations; (2) A public meeting was held on November 30, 1995, to obtain early input on the research priorities, criteria for selection of priorities, and the process for developing the agenda; (3) Regional public meetings will be held to increase the opportunities for input from employers, employees, scientists, and other public stakeholders across the United States; (4) A final public meeting will be held in March 1996 to present a preliminary research agenda and provide the opportunity for public review and comment; and, (5) Public input throughout the process; the public is encouraged to provide oral comments at the public meetings and written comments through March 6, 1996.

The final agenda will be presented at a scientific symposium commemorating the 25th anniversary of the Occupational Safety and Health Act on April 29, 1996.

NIOSH encourages the public to provide recommendations on research priorities, criteria for determining priorities, and the process of developing the research agenda throughout the process. To attend, any or all of these three meetings, or to receive additional information, please contact Mr. Chris Olenec as indicated below. On-site registration will be available; however, to assist in planning for the meeting, advance registration is requested.

ADDRESSES: Written public comments on the National Occupational Research Agenda should be mailed to Ms. Diane Manning, NIOSH, CDC, Robert A. Taft Laboratories, M/S C34, 4676 Columbia Parkway, Cincinnati, Ohio 45226.

CONTACT PERSON FOR ADDITIONAL INFORMATION: Mr. Chris Olenec, NIOSH, CDC, 200 Independence Avenue, Room 317B, Washington, DC 20201, telephone 202/205-2640 or by FAX (202) 260-1898.

Dated: November 28, 1995.

Nancy C. Hirsch,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention (CDC).

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Health Resources and Services Administration

Program Announcement for Grant and Cooperative Agreement Programs Administered by the Division of Disadvantaged Assistance, Bureau of Health Professions for Fiscal Year 1996

The Health Resources and Services Administration (HRSA) announces that applications will be accepted for three grant programs for fiscal year (FY) 1996 under the authority of title VII of the Public Health Service (PHS) Act, as amended by the Health Professions Education Extension Amendments of 1992, Pub. L. 102-408, dated October 13, 1992. These programs include:

Grants for Centers of Excellence (COE) in Minority Health Professions Education (section 739, PHS Act)

Grants for Health Careers Opportunity Program (HCOP) (section 740, PHS Act)

Grants for the Minority Faculty Fellowship Program (MFFP) (section 738(b), PHS Act)

This program announcement is subject to reauthorization of the legislative authority and to the appropriation of funds. Applicants are advised that this program announcement is a contingency action being taken to assure that should authority and funds become available for this purpose, they can be awarded in a timely fashion consistent with the needs of the program as well as to provide for even distribution of funds throughout the fiscal year. At this time, given a continuing resolution and the absence of FY 1996 appropriations for title VII programs, the amount of available funding for these specific grant programs cannot be estimated.

Funding factors will be applied in determining funding of approved applications for some of these programs. A funding preference is defined as the funding of a specific category or group of approved applications ahead of other categories or groups of approved applications. A funding priority is defined as the favorable adjustment of aggregate review scores of individual approved applications when applications meet specified criteria. It is not required that applicants request consideration for a funding factor. Applications which do not request consideration for funding factors will be reviewed and given full consideration for funding.

Definitions

The following definitions were established after public comment at 56 FR 22440, dated May 15, 1991.

"A significant number of minority individuals enrolled in the school" means that to be eligible to apply for a Hispanic COE, a medical, osteopathic medicine, or dental school must have at least 25 enrolled Hispanic students. Schools of pharmacy must have at least 20 enrolled Hispanic students. To apply as a Native American COE, an eligible medical or dental school must have at least eight enrolled Native American students and a school of pharmacy or osteopathic medicine must have at least five enrolled Native American students. To be eligible to apply for an "Other" Minority Health Professions Education COE, an eligible school must have above the national average of underrepresented minorities (medicine 13%, osteopathic medicine 8%, dentistry 15%, pharmacy 11%) enrolled in the school. Applicants must evidence that any particular subgroup of Asian individuals is underrepresented in a specific discipline. These numbers represent the critical mass necessary for a viable program. A viable program is one in which there is a sufficient number of students to warrant a Center of Excellence level educational program. Stated numerical levels are just above the median for schools reporting a critical mass necessary for a viable program. The requirement that schools applying for Other Minority Health Professions Education Centers have an enrollment of underrepresented students that is above the national average for that discipline is statutory.

"Effectiveness in Providing Financial Assistance" will be evaluated by examining the data on scholarships and other financial aid provided to the targeted group in relation to the scholarships and financial aid provided to the total school population.

"Effectiveness in Recruitment" will be evaluated by examining the first-year and total enrollments of targeted students in relation to the first-year and total enrollments for the entire school.

"Effectiveness in Retaining Students" will be determined by retention rates for the targeted group and academic and non-academic support systems operative for the target group of students at the school.

"Minority" means an individual whose race/ethnicity is classified as American Indian or Alaskan Native, Asian or Pacific Islander, Black, or Hispanic.

"Underrepresented Minority" means, with respect to a health profession,

racial and ethnic populations that are underrepresented in the health profession relative to the number of individuals who are members of the population involved. This definition encompasses Blacks, Hispanics, Native Americans, and, potentially, various subpopulations of Asian individuals. Applicants must evidence that any particular subgroup of Asian individuals is underrepresented in a specific discipline.

The following definitions were established in OMB Directive No. 15. "American Indian or Alaskan Native" means a person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition. This definition applies to the Health Careers Opportunity Program.

"Asian or Pacific Islander" means a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

"Black" means a person having origins in any of the black racial groups of Africa.

"Hispanic" means a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

Following are additional definitions. As defined in section 799, "accredited," when applied to a school of medicine, optometry, podiatry, pharmacy, public health or chiropractic, or a graduate program in health administration, clinical psychology, clinical social work, or marriage and family therapy, means a school or program that is accredited by a recognized body or bodies approved for such purpose by the Secretary of Education, except that a new school or program that, by reason of an insufficient period of operation, is not, at the time of application for a grant or contract under this title, eligible for accreditation by such a recognized body or bodies, shall be deemed accredited for purposes of this title, if the Secretary of Education finds, after consultation with the appropriate accreditation body or bodies, that there is reasonable assurance that the school or program will meet the accreditation standards of such body or bodies prior to the beginning of the academic year following the normal graduation date of the first entering class in such school or program.

"Community-based Program" means a program with organizational

headquarters located in and which primarily serves: a Metropolitan Statistical Area, as designated by the Office of Management and Budget; a Bureau of Economic Analysis, U.S. Department of Commerce designated nonmetropolitan economic area or a county; or Indian tribe(s) as defined in 42 CFR 36.102(c), i.e., an Indian tribe, band, nation, rancheria, Pueblo, colony or community, including an Alaska Native Village or regional or village corporation.

As defined in section 799, "graduate program in health administration" and "graduate program in clinical psychology" mean an accredited graduate program in a public or nonprofit private institution in a State that provides training leading, respectively, to a graduate degree in health administration or an equivalent degree and a doctoral degree in clinical psychology or an equivalent degree.

For the Health Careers Opportunity Program, "health professions schools" means schools of allopathic medicine, dentistry, osteopathic medicine, pharmacy, optometry, podiatric medicine, veterinary medicine, public health, chiropractic, or graduate programs in clinical psychology and health administration, as defined in sections 799 (l)(A) and (l)(B) of the Public Health Service Act and as accredited in section 799(l)(E) of the Act.

For the Centers of Excellence Program, "health professions schools" means schools of medicine, osteopathic medicine, dentistry and pharmacy, as defined in section 739(h), which are accredited as defined in section 799(l)(E) of the Act. For purposes of the Historically Black Colleges and Universities (HBCUs), this definition means those schools described in section 799(l)(A) of the Act and which have received a contract under section 788B of the Act (Advanced Financial Distress Assistance) for fiscal year 1987.

As defined in 42 CFR 57.1804(b)(2), an "individual from a disadvantaged background" means an individual who: (a) Comes from an environment that has inhibited the individual from obtaining the knowledge, skills and abilities required to enroll in and graduate from a health professions school or from a program providing education or training in an allied health profession or; (b) comes from a family with an annual income below a level based on low-income thresholds according to family size, published by the U.S. Bureau of the Census, adjusted annually for changes in the Consumer Price Index and adjusted by the Secretary for use in all health professions programs.

The following income figures determine what constitutes a low-income family for purposes of these Health Careers Opportunity Program grants for fiscal year 1996:

Size of parents' family ¹	Income level ²
1	\$10,000
2	12,900
3	15,400
4	19,700
5	23,200
6 or more	26,100

¹ includes only dependents listed on Federal income tax forms.

² adjusted gross income for calendar year 1994, rounded to nearest \$100.

As defined in section 739, the term "Native Americans" means American Indians, Alaskan Native, Aleuts, and Native Hawaiians. This definition applies to the Centers of Excellence Program.

For the Minority Faculty Fellowship Program, "minority" means an individual from a racial or ethnic group that is underrepresented in the health professions, as defined in section 738.

"Program of Excellence" means any programs carried out by a health professions school with funding under section 739 Grants for Centers of Excellence in Minority Health Professions Education.

As defined in section 799, the term "school of allied health" means a public or nonprofit private college, junior college, or university or hospital-based educational entity that: a) provides, or can provide, programs of education to enable individuals to become allied health professionals or to provide additional training for allied health professionals; b) provides training for not less than a total of 20 persons in the allied health curricula (except that this subparagraph shall not apply to any hospital-based educational entity); c) includes or is affiliated with a teaching hospital; and d) is accredited by a recognized body or bodies approved for such purposes by the Secretary of Education or which provides to the Secretary satisfactory assurance by such accrediting body or bodies that reasonable progress is being made toward accreditation.

As defined in section 799, "school of medicine," "school of dentistry," "school of osteopathic medicine," "school of pharmacy," "school of optometry," "school of podiatric medicine," "school of veterinary medicine," "school of public health," and "school of chiropractic" mean an accredited public or nonprofit private school in a State that provides training

leading, respectively, to a degree of doctor of medicine, a degree of doctor of dentistry or an equivalent degree, a degree of doctor of osteopathy, a degree of bachelor of science in pharmacy or an equivalent degree or a degree of doctor of pharmacy or an equivalent degree, a degree of doctor of optometry or an equivalent degree, a degree of doctor of podiatric medicine or an equivalent degree, a degree of doctor of veterinary medicine or an equivalent degree, a graduate degree in public health or an equivalent degree, and a degree of doctor of chiropractic or an equivalent degree, and including advanced training related to such training provided by any such school.

As defined in section 799, "State" includes the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, the Republic of Palau, the Republic of the Marshall Islands, the Federated States of Micronesia, Virgin Islands, Guam and American Samoa.

Centers of Excellence (COE) in Minority Health Professions Education

Purposes: Grants for eligible Historically Black Colleges and Universities (HBCUs), Hispanic, Native American and Other Centers of Excellence must be used by the schools for the following purposes:

1. To establish, strengthen, or expand programs to enhance the academic performance of minority students attending the school;
2. To establish, strengthen, or expand programs to increase the number and quality of minority applicants to the school;
3. To improve the capacity of such schools to train, recruit, and retain minority faculty;
4. With respect to minority health issues, to carry out activities to improve the information resources and curricula of the school and clinical education at the school; and
5. To facilitate faculty and student research on minority health issues.

Applicants must address all five legislative purposes. In addition, grants for eligible HBCUs as described in section 799(l)(A) and which have received a contract under section 788B of the Act (Advanced Financial Distress Assistance) for FY 1987 may also be used to develop a plan to achieve institutional improvements, including financial independence, to enable the school to support programs of excellence in health professions education for minority individuals, and to provide improved access to the

library and informational resources of the school.

Other Requirements: For Hispanic Centers of Excellence, the health professions schools must agree to give priority to carrying out the duties with respect to Hispanic individuals.

Regarding Native American Centers of Excellence, the health professions school must agree to:

1. Give priority to carrying out the duties with respect to Native Americans;
2. Establish a linkage with one or more public or nonprofit private institutions of higher education whose enrollment of students has traditionally included a significant number of Native Americans for purposes of identifying potential Native American health professions students of the institution who are interested in a health professions career and facilitating their educational preparation for entry into the health professions school; and
3. Make efforts to recruit Native American students, including those who have participated in the undergraduate program of the linkage school, and assist them in completing the educational requirements for a degree from the health professions school.

With respect to meeting these requirements, a grant for a Native American Center of Excellence may be made not only to a school of medicine, osteopathic medicine, dentistry, or pharmacy that individually meets eligibility conditions but also to such school that has formed a *consortium* of schools that collectively meet conditions, without regard to whether the schools of the consortium individually meet the conditions. The consortium would be required to consist of the school seeking the grant and one or more schools of medicine, osteopathic medicine, dentistry, pharmacy, nursing, allied health, or public health. The schools of the consortium must have entered into an agreement for the allocation of the grant among the schools. Each of the schools must have agreed to expend the grant in accordance with requirements of this program. Each of the schools of the consortium must be part of the same parent institution of higher education as the school seeking the grant or be located not more than 50 miles from the school (the applicant).

To qualify as an "Other" Minority Health Professions Education Center of Excellence, a health professions school (*i.e.*, a school of medicine, osteopathic medicine, dentistry, or pharmacy) must have an enrollment of underrepresented minorities above the national average for such enrollments of health

professions schools. (See definition for "A significant number of minority individuals enrolled in the school.")

Eligibility: Section 739 authorizes the Secretary to make grants to schools of medicine, osteopathic medicine, dentistry and pharmacy for the purpose of assisting the schools in supporting programs of excellence in health professions education for Black, Hispanic and Native American individuals, as well as for HBCUs as described in section 799(l)(A) and which have received a contract under section 788B of the Act (Advanced Financial Distress Assistance) for FY 1987.

To qualify as a COE, a school is required to:

1. Have a significant number of minority individuals enrolled in the school, including individuals accepted for enrollment in the school (see definition for "A significant number of minority individuals enrolled in the school");
2. Demonstrate that it has been effective in assisting minority students of the school to complete the program of education and receive the degree involved;
3. Show that it has been effective in recruiting minority individuals to attend the school, including providing scholarships and other financial assistance to such individuals, and encouraging minority students of secondary educational institutions to attend the health professions school; and
4. Demonstrate that it has made significant recruitment efforts to increase the number of minority individuals serving in faculty or administrative positions at the school.

These entities must be located in a State.

Payments under grants for Centers of Excellence may not exceed 3 years, subject to annual approval by the Secretary, the availability of appropriations, and acceptable progress toward meeting originally stated objectives.

Review Criteria: The review of applications will take into consideration the following criteria:

1. The degree to which the applicant can arrange to continue the proposed project beyond the Federally-funded project period;
2. The degree to which the proposed project meets the purposes described in the legislation;
3. The relationship of the objectives of the proposed project to the goals of the plan that will be developed;

4. The administrative and managerial ability of the applicant to carry out the project in a cost effective manner;

5. The adequacy of the staff and faculty to carry out the program;

6. The soundness of the budget for assuring effective utilization of grant funds, and the proportion of total program funds which come from non-Federal sources and the degree to which they are projected to increase over the grant period;

7. The number of individuals who can be expected to benefit from the project; and

8. The overall impact the project will have on strengthening the school's capacity to train the targeted minority health professionals and increase the supply of minority health professionals available to serve minority populations in underserved areas.

Established Funding Preference: A funding preference will be given to competing continuation (renewal) applications for Centers of Excellence programs whose current project periods end in fiscal year 1996 and which score at or above the 50th percentile of all applications which are recommended for approval. The purpose of this preference is to maximize Federal and non-Federal investments in accomplishing the nature and scope of the legislative purposes of the Centers of Excellence Program. To realize the intended impact of the COE program more than one grant period is required. This funding preference is intended to direct assistance to quality COE programs that have documented sustained or increased accomplishments under this program.

This funding preference was established in FY 1995, following public comment (60 FR 6719, dated February 3, 1995) and is continued in FY 1996 with the addition of the requirement to score at or above the 50th percentile.

Maintenance of Effort: A health professions school receiving a grant will be required to maintain expenditures of non-Federal amounts for such activities at a level that is not less than the level of such expenditures maintained by the school for the fiscal year preceding the fiscal year for which the school receives such a grant. In addition, the school agrees that before expending grant funds, the school will expend amounts obtained from sources other than the grant.

Funding: The statute requires that, of the amount appropriated for any fiscal year, the first \$12 million will be allocated to certain Historically Black Colleges and Universities (HBCUs) described in section 799(1)(A) of the Act and which received a contract under

section 788B of the Act (Advanced Financial Distress Assistance) for the fiscal year 1987. Of the remaining balance, sixty (60) percent must be allocated to Hispanic and Native American Centers of Excellence, and forty (40) percent must be allocated to the "Other" Centers of Excellence. A grant made for a fiscal year may not be made in an amount that is less than \$500,000 for each Center.

Health Careers Opportunity Program (HCOP)

Purpose and Eligibility: Section 740 authorizes the Secretary to make grants to and enter into contracts with schools of allopathic medicine, osteopathic medicine, public health, dentistry, veterinary medicine, optometry, pharmacy, allied health, chiropractic and podiatric medicine and public and nonprofit private schools which offer graduate programs in clinical psychology and other public or private nonprofit health or educational entities to carry out programs which assist individuals from disadvantaged backgrounds to enter and graduate from such schools. The assistance authorized by this section may be used to: (1) Identify, recruit, and select individuals from disadvantaged backgrounds for education and training in a health profession; (2) provide for a period prior to the entry of such individuals into the regular course of education of such a school, preliminary education designed to assist them to complete successfully such regular course of education at such a school or referring such individuals to institutions providing such preliminary education; (3) facilitate the entry and retention of such individuals in health and allied health professions schools; and (4) provide counseling and advice on financial aid to assist such individuals to complete successfully their education at such schools. Applicants must address at least 2 purposes. The period of Federal support will not exceed 3 years.

Project Requirements for Postbaccalaureate Programs: The following project requirements for postbaccalaureate programs were established as a preference after public comment at 55 FR 11264, dated March 27, 1990. Postbaccalaureate programs may also combine the following requirements with other HCOP activities as defined in the statutory purposes described above.

A. A health professions school will meet the requirements for a postbaccalaureate program if:

1. Either the applicant health professions school or an undergraduate

school with which it has a formal arrangement:

a. Identifies and selects a cohort of seven or more disadvantaged students that have completed an undergraduate prehealth professions program and applied but were not accepted into a health professions school, or made a late decision to enter a new health professions school for participation in the program; and

b. Provides the selected student cohort with one calendar year (including the initial 6 to 8 week summer program) of rigorous postbaccalaureate (undergraduate and/or professional) level science and other appropriate educational experiences to prepare the students for entry into the applicant health professions school; and

2. The applicant health professions school:

a. Accepts for enrollment in the first year of its health professions school class, upon entry into the post-baccalaureate program, members of the cohort who successfully complete the program; or assures enrollment, at the election of the student at another health professions school; and

b. Provides members of the cohort and other disadvantaged enrollees retention services including a 6 to 8 week prematriculation summer program to ease their transition into the health professions school curriculum.

Stipends would be available through the grant for the targeted students during their summer programs and undergraduate academic year participation.

B. A school of allied health will meet the requirements for a postbaccalaureate program if:

1. Either the applicant allied health school or an undergraduate school offering pre-allied health preparation with which the school has a formal arrangement:

a. Identifies and selects a cohort of five or more disadvantaged students for participation in the program who have completed an undergraduate degree with a significant science focus and made a late decision to enter an allied health professions school and are in pursuit of a baccalaureate level degree in physical therapy, physician assistant, respiratory therapy, medical technology, or occupational therapy; and

b. Provides the selected student cohort with one calendar year (including an initial 6 to 8 week summer program) of rigorous science and other education experiences (e.g., allied health basic science, and quantitative and reading skills), to prepare them for entry at the end of that year into one of the above-named

baccalaureate level training programs of the applicant allied health school; and

2. The applicant allied health school:

a. Accepts for enrollment in the first-year class of one of the specified baccalaureate level training programs of the applicant allied health school under entry into the preprofessional phase, members of the cohort who complete the program, or assures enrollment, at the election of the student at another health professions school; and

b. Provides members of the cohort and other disadvantaged enrollees with retention services including a 6 to 8 week prematriculation summer program to ease the transition into the specified allied health professions school curriculum.

Review Criteria: The review of applications will take into consideration the following:

(a) The degree to which the proposed project adequately provides for the requirements in the program regulations;

(b) The number and types of individuals who can be expected to benefit from the project;

(c) The administrative and management ability of the applicant to carry out the proposed project in a cost effective manner;

(d) The adequacy of the staff and faculty;

(e) The soundness of the budget;

(f) The potential of the project to continue without further support under this program.

Statutory Funding Priority: Public Law 102-408 requires the Secretary to give priority in funding to the following schools:

1. A school which previously received an HCOP grant and increased its first-year enrollment of individuals from disadvantaged backgrounds by at least 20 percent over that enrollment in the base year 1987 (for which the applicant must supply data) by the end of 3 years from the date of the award of the HCOP grant; and

2. A school which had not previously received an HCOP grant that increased its first-year enrollment of individuals from disadvantaged backgrounds by at least 20 percent over that enrollment in the base year 1987 (for which the applicant must supply data) over any period of time (3 consecutive years).

Established Funding Priority: The following funding priority was established in fiscal year 1990 after public comment at 55 FR 11264, dated March 27, 1990, and is being continued in FY 1996, with the exception that wording related to alternative means of documenting enrollment in terms of increases and retention rates for

disadvantaged students has been deleted. Progress in these areas is considered as a part of the merit review process for this program and applicants will be informed of relevant benchmarks in application materials.

A funding priority will be given to HCOP applications from health professions schools that have a disadvantaged student enrollment of 35 percent or more. Traditionally, disadvantaged students have been disproportionately underrepresented in the health profession schools and the health professions. A funding priority will also be given to schools of allied health offering baccalaureate or higher level programs in physical therapy, physician assistant, respiratory therapy, medical technology or occupational therapy that have a disadvantaged student enrollment of 35 percent or more among those programs.

Funding Preference: The following preference was established following public comment at 57 FR 61914, dated December 29, 1992 and will be applied in FY 1996. Preference be given to competing continuation applications (renewals) for postbaccalaureate programs funded under the fiscal year 1990 HCOP Funding Preference (as defined in the Federal Register notice of March 27, 1990, 55 FR 11264) which score at or above the 50th percentile of all applications which are recommended for approval, and which can evidence the following: (1) disadvantaged students were recruited into the postbaccalaureate program at a level at least equal to the number of students originally projected in FY 1990, and (2) the cohort of first year disadvantaged students entering the health or allied health professions school in September 1996 exceeds the number of disadvantaged students enrolled in the first year class in September 1995 by a number equal to 50 percent of the postbaccalaureate participants projected for enrollment in 1996.

In addition, consideration will be given to an equitable geographic distribution of projects, and the assurance that a combination of all funded projects represents a reasonable proportion of the health professions specified in the legislation.

Funding: The statute requires that, of the amount appropriated for any fiscal year, 20 percent must be obligated for stipends to disadvantaged individuals of exceptional financial need who are students at schools of allopathic medicine, osteopathic medicine, or dentistry.

Grants for the Minority Faculty Fellowship Program (MFFP)

Purpose: The purpose of the MFFP is to increase the number of underrepresented minority faculty members in health professions schools, i.e., schools of medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, health administration, clinical psychology, and other public or private nonprofit health or educational entities.

Specifically, these grant awards are intended to allow institutions an opportunity to provide a fellowship to individuals who have the potential for teaching, administering programs, or conducting research as faculty members. Institutions must demonstrate a commitment and ability to identify, recruit, and select underrepresented minorities in health professions. The institutions' training programs provide the fellows with the techniques and skills needed to secure an academic career including competence in: pedagogical skills, research methodology, development of research grant proposals, writing and publication skills, and the ability to work with minority populations and provide health services to medically underserved communities. In addition, the fellows must work under the direct supervision of a senior level faculty member engaged in the disciplines mentioned above, and upon successful completion of the program would be assured a teaching position at the institution.

Section 738(b) authorizes the Secretary to provide a one-year fellowship award to an eligible health professions school which includes a stipend in an amount not exceeding 50 percent of the regular salary of a similar faculty member, or \$30,000, whichever is less. Grant funds are available to support fellow costs *only* and are limited to stipend, tuition and fees, and travel. Stipends must be paid by the grantee institution in accordance with its usual institutional payment policy, schedule and procedures. Stipend funds may be supplemented through other resources. Direct financial assistance to fellows may not be received concurrently with any other Federal education award (fellowship, traineeship, etc.), except for educational assistance under the Veterans Readjustment Benefits Act ("GI Bill"). Loans from Federal funds are not considered Federal awards. Any fellow who continues to receive full institutional salary is not eligible for stipend support from these grant funds.

Period of Support: The period of Federal support will not exceed one year for each fellowship award to an applicant institution. However, a fellowship award to an individual recipient must be for a minimum of two years. The program *does not* contribute to the support of the fellow in the second year. The applicant institution (school) will be required to support the fellow for the second year at a level not less than the total of Federal and institutional funds awarded for the first year.

Eligibility Requirements for the Applicant Institution: Eligible applicants for this program are schools of allopathic medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, health administration, clinical psychology, and other public or private nonprofit health or educational entities.

In addition, to receive a fellowship award, an applicant institution must demonstrate to the Secretary that it has the commitment and ability to:

- Identify, recruit and select individuals from underrepresented minorities in health professions who have the potential for teaching, administering programs, or conducting research at a health professions institution;
- Provide such individuals with the skills necessary to enable them to secure an academic career. Training may include: pedagogical skills, program administration, the design and conduct of research, grant writing, and the preparation of articles suitable for publication in peer reviewed journals;
- Provide services designed to assist such individuals in their preparation for an academic career, including the provision of mentors; and
- Provide health services to rural or medically underserved populations.

In Addition, the Applicant Institution Shall Agree to the Following Assurances:

- Provide an assurance that the applicant institution will make available (directly through cash donations) \$1 for every \$1 of Federal funds received under the fellowship (each fellowship must include a stipend in an amount not exceeding 50 percent of the regular salary of a similar faculty member, or \$30,000, whichever is less);
- Provide an assurance that institutional support will be provided for the individual for a second year at a level not less than the total amount of Federal and institutional funds provided in the year in which the grant was awarded;

- Provide an assurance that the fellowship recipient is from a minority group underrepresented in the health professions; has at a minimum, appropriate advanced preparation (such as a master's or doctoral degree in a health profession) and special skills necessary to enable that individual to teach and practice;

- Provide an assurance that the recipient of the fellowship will be a member of the faculty of the applicant institution; and

- Provide an assurance that the recipient of the fellowship has not been a member of the faculty of any school at any time during the 18-month period preceding the date on which the individual submits a request for the fellowship.

Eligibility Requirements for the Fellows: Fellowship awards must be for two years, and are provided for an individual who meets the following criteria:

- Individual must be from a minority group underrepresented in the health professions;

- Individual must have appropriate advanced preparation (such as a master's or doctoral degree in a health profession) and special skills necessary to enable that individual to teach and practice;

- Individual must not have been a member of the faculty of any school at any time during the 18-month period preceding the date on which the individual submits a request for the fellowship;

- Individual must have completely satisfied any other obligation for health professional service which is owed under an agreement with the Federal Government, State Government, or other entity prior to beginning the period of service under this program;

- Individual must be a U.S. citizen, noncitizen national, or foreign national who possesses a visa permitting permanent residence in the United States.

Breach of Fellowship Funds: The school will be required to return fellowship funds received if it fails to honor the terms of the fellowship award. Such sums must be paid within 1 year from the day the Secretary determines that the breach occurred. If payment is not received by the payment date, additional interest, penalties, and administrative charges will be assessed in accordance with Federal Law (45 CFR 30.13).

Review Criteria: The review of applications will take into consideration the following review criteria:

1. The extent to which the institution demonstrates that it has the

commitment and ability to identify, recruit, and select underrepresented minority faculty, and its ability to provide health services to rural or medically underserved populations;

2. The extent to which the institution's training program will provide the fellow with the preparation, training, and skills needed to secure an academic career. Training may include: pedagogical skills, program administration, grant writing and publication skills, research methodology and development of research grant proposals, and community service abilities;

3. The degree to which the institution's senior faculty are involved in the training and preparation of fellows pursuing an academic career, and the potential of the institution to continue the program without Federal support beyond the approved project period; and

4. The extent to which the institution meets the eligibility requirements set forth in section 738(b) of the Public Health Service Act.

In determining awards, the Secretary will also take into consideration equitable distribution among health disciplines and geographic areas.

National Health Objectives for the Year 2000

The Public Health Service urges applicants to submit work plans that address specific objectives of Healthy People 2000. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report; Stock No. 017-001-00474-0) or *Healthy People 2000* (Summary Report; Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (telephone 202-783-3238).

Education and Service Linkage

As part of its long-range planning, HRSA will be targeting its efforts to strengthen linkages between U.S. Public Health Service education programs and programs which provide comprehensive primary care services to the underserved.

Smoke-Free Workplace

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products and Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

Application Availability

Application materials are available on the World Wide Web at address: <http://www.os.dhhs.gov/hrsa/>. Click on the file name you want to download to your computer. It will be saved as a self-extracting WordPerfect 5.1 file. Once the file is downloaded to the applicant's PC, it will still be in a compressed state. To decompress the file, go to the directory where the file has been downloaded and type in the file name followed by a <return>. The file will expand into a WordPerfect 5.1 file. Applicants are strongly encouraged to obtain

application materials from the World Wide Web via the Internet.

Questions regarding grants policy and business management issues should be directed to Ms. Wilma Johnson, Acting Chief, Centers and Formula Grants Section (wjohnson@hrsa.ssw.dhhs.gov), Grants Management Branch, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 8C-26, 5600 Fishers Lane, Rockville, Maryland 20857. Completed applications should be returned to the Grants Management Branch at the above address.

If additional programmatic information is needed, please contact

Division of Disadvantaged Assistance, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 8A-17, 5600 Fishers Lane, Rockville, Maryland 20857. The table below provides specific names, phone numbers and deadline dates for each program. If you are unable to obtain the application materials electronically, you may obtain application materials in the mail by sending a written request to the Division of Disadvantaged Assistance at the address above. Written requests may also be sent via FAX (301) 443-5242 or via the Internet (e-mail address: bbrooks@hrsa.ssw.dhhs.gov).

TABLE 1

PHS section No., title, CFDA No., regulation	Grants management contact e-mail: wjohnson@hrsa.ssw.dhhs.gov FAX: (301) 443-6343	Programmatic contact e-mail: bbrooks@hrsa.ssw.dhhs.gov FAX: (301) 443-5242	Deadline date
739, Centers of Excellence, 93.157, 42 CFR part 57 subpart V.	Wilma Johnson, (301) 443-6880.	A. Roland Garcia, Ph.D. (301) 443-4493	2/9/96
740, Health Careers Opportunity Program, 93.822, 42 CFR part 57 subpart S.	Wilma Johnson (301) 443-6880.	Mario A. Manecchi, MPH (301) 443-4493	2/9/96
738(b), Minority Faculty Fellowship Program ...	Wilma Johnson (301) 443-6880.	Lafayette Gilchrist (301) 443-3680	2/9/96

Paperwork Reduction Act

The standard application form PHS 6025-1, HRSA Competing Training Grant Application, and General Instructions have been approved by the Office of Management and Budget under the Paperwork Reduction Act. The OMB Clearance Number is 0915-0060.

The deadline dates for receipt of applications for each of these programs are shown in Table 1. Applications will be considered to be "on time" if they are either:

- (1) *Received on or before* the established deadline date, or
- (2) *Sent on or before* the established deadline date and received in time for orderly processing. (Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

Late applications not accepted for processing will be returned to the applicant. In addition, applications which exceed the page limitation and/or do not follow format instructions will not be accepted for processing and will be returned to the applicant.

These programs are not subject to the provisions of Executive Order 12372, Intergovernmental Review of Federal Programs (as implemented through 45 CFR part 100). These programs are also

not subject to the Public Health System Reporting Requirements.

Dated: November 28, 1995.

John D. Mahoney,

Acting Administrator.

[FR Doc. 95-29421 Filed 12-1-95; 8:45 am]

BILLING CODE 4160-15-P

National Institutes of Health**National Institute on Deafness and Other Communication Disorders; Notice of Closed Meeting**

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting:

Name of Committee: National Institute on Deafness and other Communication Disorders Special Emphasis Panel.

Date: December 12, 1995.

Time: 9 am to 12 noon.

Place: 6120 Executive Boulevard, Room 400C, Rockville, MD 20852.

Contact Person: Mary Nekola, Ph.D., Scientific Review Administrator, NIH, NIDCD, EPS Room 400C, 6120 Executive Boulevard, MSC 7180, Bethesda, MD 20892-7180, 301/496-8683.

Purpose/Agenda: To review and evaluate Training Grant applications (T32).

The meeting, which will be conducted as a telephone conference call, will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C.

Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

This notice is being published less than fifteen days prior to the meeting due to the urgent need to meet timing limitations imposed by the grant review cycle.

(Catalog of Federal Domestic Assistance Program No. 93.173 Biological Research Related to Deafness and Communication Disorders)

Dated: November 28, 1995.

Susan K. Feldman,

Committee Management Officer, NIH.

[FR Doc. 95-29463 Filed 12-01-95; 8:45 am]

BILLING CODE 4140-01-M

Substance Abuse and Mental Health Services Administration**Current List of Laboratories Which Meet Minimum Standards To Engage in Urine Drug Testing for Federal Agencies and Laboratories that Have Withdrawn from the Program**

AGENCY: Substance Abuse and Mental Health Services Administration, HHS (Formerly: National Institute on Drug Abuse, ADAMHA, HHS).

ACTION: Notice.