

service providers will use to submit information annually about program and client characteristics. The data collected will be used within and

outside MCHB and HRSA to inform the administration and Congress about the Title IV program and will be used by grantees and MCHB for other planning

and policy efforts. Burden estimates are as follows:

Type of form	Number of respondents	Responses per respondent	Average hours per response	Total burden hours
Designation of Local Reporting Entities	38	1	0.5	19
Local Network Profile	110	1	.5	55
Service Mix Profile	110	1	2.8	308
Demographic and Clinical Status	110	1	33.0	3,630
Service Utilization Summary	110	1	20.0	2,200
Prevention and Education Activities	110	1	4.0	440

Estimated Total Annual Burden: 6652 hours.

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Virginia Huth, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: March 6, 1996.

J. Henry Montes,
Associate Administrator for Policy Coordination.

[FR Doc. 96-5811 Filed 3-11-96; 8:45 am]

BILLING CODE 4160-15-P

National Institutes of Health

Proposed Data Collection; Comment Request

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the National Institutes of Health (NIH), National Cancer Institute (NCI) will publish periodic summaries of proposed projects. To request more information on the proposed project, call Amy F. Subar, Ph.D., Nutritionist, or Susan M.

Krebs-Smith, Ph.D., Nutritionist, at (301) 496-8500.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proposed performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Send comments to Amy F. Subar, Ph.D., Susan M. Krebs-Smith, Ph.D., National Cancer Institute, EPN 313, 6130 Executive Blvd., MSC 7344, Bethesda, MD 20892-7344. Written comments should be received by (Federal Register insert the date 60 days following the date of publication).

Proposed Project: Followup Survey of the National 5 A Day for Better Health Program—New—This study will measure five year trends in fruit and vegetable intakes and in knowledge, attitudes, and benefits about diet and

nutrition specific to fruit and vegetable intake. The purpose of this study is to evaluate the effectiveness of the National 5 A Day for Better Health Program in the first five years of its existence. Two questionnaires will be administered concurrently via telephone to separate national samples of households, with an oversampling of African Americans and Hispanics. Methods, sampling, and techniques will be as similar as possible to that conducted in the original Baseline Survey. The difference between the samples will be in the survey instruments administered. The first, long questionnaire is the instrument used in the original 5 A Day Baseline Survey. The second, short questionnaire will obtain similar information to that collected using the long questionnaire. Because of concern for response rates and possible biases associated with low response rates, a survey of non-respondents from the long survey will also be conducted. This survey will use methods as similar as possible to those employed in the non-respondent survey to the 1991 Baseline Survey. Study participants will be U.S. adults 18 years and old residing in these coterminous states. Burden estimates are as follows:

	No. of respondents	Instrument type	No. of responses per respondent	Avg burden/response
Group 1	2,000	Long	1	.501 hrs.
Group 2	2,050	Short	1	.251 hrs.
Non-Response	150	Response	1	.167 hrs.

Dated: March 1, 1996

Philip D. Amoruso,
NCI Executive Officer.

[FR Doc. 96-5760 Filed 3-11-96; 8:45 am]

BILLING CODE 4140-01-M

Submission for OMB Review; Preventing Problem Behavior Among Middle School Students; Comment Request

SUMMARY: Under the provisions of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the National

Institute of Child Health and Human Development (NICHD), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection

was previously published in the Federal Register on September 21, 1995, pages 49001-49002 and allowed 60-days for public comment. No comments were received. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

PROPOSED COLLECTION:

Title: Preventing Problem Behavior Among Middle School Students.

Type of Information Collection

Request: NEW

Need and Use of Information

Collection: This study will test the effect of a special program of education on the prevalence of problem behavior among students in the 6th, 7th, and 8th grades, ages 11-14. The study involves the students in seven middle schools in one Maryland school district. The school board, school superintendent, principals of each middle school, and various parent and teacher groups have reviewed and approved or endorsed the study, including data collection. Students will be asked to complete questionnaires on attitudes and behavior regarding the use of tobacco, alcohol, and drugs, and misconduct at school and in the community. Also, a sample of 1,000 parents of these students will be interviewed by telephone about practices that protect children from problem behavior.

Frequency of Response: On occasion.

Affected Public: Individuals or households; State, local, or Tribal Governments.

Type of Respondents: Children and Parents. The annual reporting burden is as follows:

Estimated Number of Respondents: 7,400;

Estimated Number of Responses per Respondent: .73;

Average Burden Hours per Response: .91; and

Estimated Total Annual Burden Hours Requested: 4,900.

The total annualized cost to respondents is estimated at: \$49,000. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

REQUEST FOR COMMENTS: Written comments and/or suggestions from the public are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (2) 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; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to 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.

DIRECT COMMENTS TO OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, D.C. 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Bruce Simons-Morton, Prevention Research Branch, DESPR, NICHD, NIH, Room 7B05, 6100 Executive Blvd., Rockville, MD 20852, or call non-toll-free number (301) 496-1126, or E-mail your request, including your address to: MortonB@HD01.NICHD.NIH.GOV.

COMMENTS DUE DATE: Comments regarding this information collection are best assured of having their full effect if received on or before April 11, 1996. Send comments to Bruce Simons-Morton, Project Officer, 6100 Executive Blvd., 7B05, DESPR, NICHD, Rockville, MD 20852.

Dated: March 1, 1996.
Heinz Berendes,
Director, DESPR, NICHD, NIH.
[FR Doc. 96-5759 Filed 3-11-96; 8:45 am]
BILLING CODE 4140-01-M

Submission for OMB Review; Comment Request; the Impact and Costs of Sealants in Young Child Populations

SUMMARY: Under the provisions of Section 3506(e)(2)(A) of the Paperwork Reduction Act of 1995, the National Institute of Dental Research (NIDR), National Institutes of Health (NIH), has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the Federal Register on August 23, 1995, page 43609, and allowed 60 days for public comment. No public

comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

PROPOSED COLLECTION:

Title: The Impact and Costs of Sealants in Young Child Populations.

Type of Information Collection

Request: New.

Need and Use of Information

Collection: This study will access the value (costs and effects) of providing dental sealants to the child population with erupted permanent teeth with occlusal surfaces (approximately ages 6-12) under alternative financial support programs in existing oral health care delivery systems and across two socioeconomic groups. The primary objectives of the study are to determine if various levels of dental insurance influence the use of dental sealants, if costs attributable to sealants in a payment program provide value in terms of reduced caries, and if providing dental sealants to specific tooth surfaces of children merits the investment of limited resources within a larger oral health care program. The findings will provide valuable information concerning: (1) Real disease reductions possibly using dental sealants for age-appropriate child populations within the existing oral health delivery system; (2) the costs of, and estimated savings from, providing sealants rather than restorative care, and (3) the marginal benefits and cost benefits of adding sealants to "normative" caries prevention efforts in age-appropriate child populations.

Frequency of Response: On occasion.

Affected Public: Individuals or Households; Businesses or Other For-Profits.

Type of Respondents: Children, Parents and Dentists. The annual reporting burden is as follows:

Estimated Number of Respondents: 6,148.

Estimated Number of Responses per Respondent: 1.

Average Burden Hours per Response: .1246; and

Estimated Total Annual Hours Requested: 766. The annualized cost to respondents is estimated at: \$5,274. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

REQUEST FOR COMMENTS: Written comments and/or suggestions from the