

number of private citizens whose reports are filed each year with OGE is less than 10, but pursuant to 5 CFR 1320.3(c)(4)(i), the lower limit for this general regulatory-based requirement is set at 10 private persons (OGE-processed reports). This yields an annual reporting burden of 15 hours, the same as in OGE's current OMB inventory for this information collection. The remainder of the private citizen reports are filed with other departments and agencies throughout the executive branch.

On October 21 1998, OGE published its first round notice of the forthcoming request for paperwork clearance for the proposed revised OGE Form 450. See 63 FR 56189-56191. The Office of Government Ethics received a few outside requests, from a couple of departments and an agency, for copies of the proposed revised OGE Form 450. In addition, OGE received one comment from one of the departments regarding the Privacy Act statement of routine uses in the instructions to the OGE Form 450.

In response to the comment, OGE notes that the routine uses are, under exemption (b)(3) of the Privacy Act, 5 U.S.C. 552a(b)(3), and OGE's OGE/GOVT-2 system of records, permissible situations in which the form may be divulged without the advance written consent or pursuant to the written request of the individual filer concerned. In addition, exemption (b)(1) of the Privacy Act, 5 U.S.C. 552a(b)(1), allows access to OGE Form 450 reports by officers and employees of the agency that maintains the report files (including OGE) who have a need for the records in the performance of their official duties. These uses and other permitted releases under the other Privacy Act exemptions do not themselves require the divulging of the OGE Form 450 reports. To determine whether to make a routine use or other permitted Privacy Act release of an OGE Form 450 report, a department or agency should look at all the circumstances, including other pertinent authorities, in order to determine whether release is authorized and otherwise appropriate.

In that regard, OGE emphasizes that, under section 107 of the Ethics Act, section 201(d) of E.O. 12674 (as modified by E.O. 12731) and 5 CFR 2634.604 and 2634.901(d) of OGE's implementing regulations, the OGE Form 450 is a confidential report form which is not to be disclosed to the public. However, as noted, the Government can make certain uses, including limited permitted releases, of the reports in accordance with the Privacy Act and other pertinent laws

and regulations. In some cases, release may be required by some other authority, such as pursuant to an order of a court of competent jurisdiction. If so, the agency should still examine the Privacy Act exemptions, including the published routine uses, to determine if release is authorized under that law. Thus, in the case of such a court order, exemption (b)(11) of the Privacy Act, 5 U.S.C. 552a(b)(11), authorizes the release, though a protective order may be sought.

In this second notice, public comment is again invited on the proposed slightly revised OGE Form 450 as set forth in this notice, including specifically views on: the need for and practical utility of this proposed modified collection of information; the accuracy of OGE's burden estimate; the enhancement of quality, utility and clarity of the information collected; and the minimization of burden (including the use of information technology). The Office of Government Ethics, in consultation with OMB, will consider all comments received, which will become a matter of public record.

Approved: February 24, 1999.

Marilyn L. Glynn,

General Counsel, Office of Government Ethics.

[FR Doc. 99-5045 Filed 3-1-99; 8:45 am]

BILLING CODE 6345-01-U

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 99037]

Economic Analyses of Engineering Control Interventions for Drywall Sanding Construction Activities Notice of Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1999 funds for a cooperative agreement program to conduct an analyses of economic variables associated with the implementation of known engineering control interventions designed for drywall sanding construction activities. This program addresses the Healthy People 2000 priority area of Occupational Safety and Health.

The purpose of the program is to identify and evaluate the universe of financial variables which are affected by implementing known drywall sanding engineering controls designed to reduce exposures to airborne particulate.

B. Eligible Applicants

Applications may be submitted by public and private nonprofit and for-profit organizations and by governments and their agencies; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit and for-profit organizations, State and local governments or their bona fide agents, and federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations.

Note: Public Law 104-65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form.

C. Availability of Funds

Approximately \$95,000 is available in FY 1999 to fund one award. It is expected that the award will begin on or about September 1, 1999, with a 12-month budget period within a project period of up to three years. The funding estimate is subject to change.

Continuation award within an approved project period will be made on the basis of satisfactory progress as evidenced by required reports and the availability of funds.

Use of Funds

Recipient will allocate funds for at least one annual meeting directed by the CDC/NIOSH project advisor.

D. Cooperative Activities

In conducting activities to achieve the purpose of this program, the recipient will be responsible for activities under 1. (Recipient Activities), and CDC/NIOSH will be responsible for the activities listed under 2. (CDC/NIOSH Activities).

1. Recipient Activities

- a. Develop, implement, and evaluate a study protocol.
- b. Analyze data and interpret findings.
- c. Disseminate study results to the construction safety and health community.

2. CDC/NIOSH Activities

- a. Provide scientific and technical collaboration in the development of the study design, protocol, and data analysis.
- b. Collaborate with awardee(s) on data analysis, and interpretation of findings.

E. Application Content

Use the information in the Cooperative Activities, Other Requirements, and Evaluation Criteria

sections to develop the application content. Your application will be evaluated on the evaluation criteria listed, so it is important to follow them in laying out your program plan. The narrative should be no more than 25 double-spaced pages. The original and each copy of the application must be submitted unstapled and unbound. All materials must be typewritten, double-spaced, with unreduced type (font size 12 point) on 8½" by 11" paper, with at least 1" margins, headers, and footers, and printed on one side only. Do not include any spiral or bound materials or pamphlets.

F. Submission and Deadline

Application

Submit the original and five copies of PHS-398 (OMB Number 0925-0001) (adhere to the instructions on the Errata Instruction Sheet for PHS 398). Forms are in the application kit. On or before April 30, 1999, submit the application to: Sheryl L. Heard, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement 99037, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Mail Stop E-13, Atlanta, Georgia 30341.

Deadline: Applications shall be considered as meeting the deadline if they are either:

(a) Received on or before the deadline date; or

(b) Sent on or before the deadline date and received in time for orderly processing. (Applicants must 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: Applications which do not meet the criteria in (a) or (b) above are considered late applications, will not be considered, and will be returned to the applicant.

G. Evaluation Criteria

Each application will be evaluated individually against the following criteria by an independent review group appointed by CDC.

1. Plan (15 percent)

Applicant's understanding of the general objectives of the proposed cooperative agreement.

2. Background (15 percent)

The extent to which the applicant's prior work and experience in evaluating occupational safety and health intervention efforts, cost variables, and/or experience within the construction

trades affected by drywall finishing operations.

3. Goals and Objectives (35 percent)

The extent to which the proposed goals and objectives are clearly stated, time-phased, and measurable. The extent to which the methods are sufficiently detailed to allow assessment of whether the objectives can be achieved for the budget period. Clearly state the evaluation method for evaluating the accomplishments. The extent to which a qualified plan is proposed that will help achieve the goals stated in the proposal. (20 percent)

The degree to which the applicant has met the CDC policy requirements regarding the inclusion of women, ethnic, and racial groups in the proposed project. This includes: (a) The proposed plan for the inclusion of both sexes and racial and ethnic minority populations for appropriate representation; (b) The proposed justification when representation is limited or absent; (c) A statement as to whether the design of the study is adequate to measure differences when warranted; and (d) A statement as to whether the plan for recruitment and outreach for study participants include the process of establishing partnerships with community(ies) and recognition of mutual benefits. (15 percent)

4. Facilities and Resources (10 percent)

The adequacy of the applicant's facilities, equipment, and other resources available for performance of this project. The proposal should include a commitment from the participating institution, as evidenced by a written agreement. For applicants who have already identified potential construction site(s) to conduct the evaluation, the proposal should include a commitment, as evidenced by a written agreement, from the building owner, general contractor, or relevant subcontractors with jurisdiction over the drywall finishing and budget management operations, when such exist at the applicant's anticipated study location(s).

5. Project Management and Staffing Plan (15 percent)

The extent to which the management staff and their working partners are clearly described, appropriately assigned, and have pertinent skills and experiences. The extent to which the applicant proposes to involve appropriate personnel who have the needed qualifications to implement the proposed plan. The extent to which the applicant has the capacity to design,

implement, and evaluate the proposed intervention program.

6. Collaboration (10 percent)

The extent to which all partners are clearly described and their qualifications and the extent to which their intentions to participate are explicitly stated. The extent to which the applicant provides proof of support (e.g., letters of support and/or memoranda of understanding) for proposed activities. Evidence or a statement should be provided that these funds do not duplicate already funded components of ongoing projects.

7. Budget Justification (Not Scored)

The budget will be evaluated to the extent that it is reasonable, clearly justified, and consistent with the intended use of funds.

8. Human Subjects (Not Scored)

If human subjects will be involved, how will they be protected, i.e., describe the review process which will govern their participation.

H. Other Requirements

Technical Reporting Requirements

Provide CDC with original plus two copies of:

1. Annual progress reports including a brief program description and a listing of program goals and objectives accompanied by a comparison of the actual accomplishments related to the goals and objectives established for the period;

2. Financial status report, no more than 90 days after the end of the budget period; and

3. Final financial status and performance reports, no more than 90 days after the end of the project period.

Send all reports to: Sheryl L. Heard, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement 99037, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Mail Stop E-13, Atlanta, Georgia 30341.

The following additional requirements are applicable to this program. For a complete description of each, see Addendum I (included in the application package).

AR-1—Human Subjects Requirements

AR-2—Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research

AR-9—Paperwork Reduction Act Requirements

AR-10—Smoke-Free Workplace Requirements

AR-11—Healthy People 2000

AR-12—Lobbying Restrictions

I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under Sections 20 (a) and 22(e)(7) of the Occupational Safety and Health Act of 1970 [29 U.S.C. 669(a) and 671(e)(7)]. The Catalog of Federal Domestic Assistance number is 93.262 for the National Institute for Occupational Safety and Health.

J. Where to Obtain Additional Information

Please refer to CDC Announcement Number 99037 when requesting information and submitting an application.

To receive additional written information call 1-888-GRANTS4 (1-888-472-6874). You will be asked to leave your name, address, and phone number and will need to refer to NIOSH Announcement 99037. You will receive a complete program description, information on application procedures, and application forms. CDC will not send application kits by facsimile or express mail.

See also the CDC home page on the Internet: <http://www.cdc.gov>.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained by contacting: Sheryl L. Heard, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Announcement 99037, Centers for Disease Control and Prevention (CDC), 2920 Brandywine Road, Mail Stop E-13, Atlanta, Georgia 30341, Email address: slh3@cdc.gov.

Program technical assistance may be obtained by contacting: Kenneth Mead, P.E., telephone (513) 841-4319, Email kcm3@cdc.gov, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC), Division of Physical Sciences and Engineering, 4676 Columbia Parkway, Mailstop R-5, Cincinnati, OH 45226.

National Occupational Research Agenda (NORA): CDC, NIOSH is committed to the program priorities developed by NORA. Copies of the publication, "The National Occupational Research Agenda" may be obtained from The National Institute of Occupational Safety and Health, Publications Office, 4676 Columbia Parkway, Cincinnati, OH 45226-1998 or telephone 1-800-356-4674, and is available through the NIOSH Home Page, "<http://www.cdc.gov/niosh/nora.html>".

Dated: February 23, 1999.

Diane D. Porter,

Acting Director, National Institute for Occupational Safety and Health, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99-5034 Filed 3-1-99; 8:45 am]

BILLING CODE 4163-19-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention****The National Center for Environmental Health (NCEH) of the Centers for Disease Control and Prevention (CDC) Announces the Following Meeting**

Name: Epidemiologic Perspective on Early Hearing Detection and Intervention (EHDI).

Time and Date: 2 p.m.-3:30 p.m., (EST), March 5, 1999.

Location: Dr. Nigel Paneth, Department of Epidemiology at Michigan State University, will make a presentation at Michigan State University, East Lansing, Michigan.

Supplementary Location Information:

Teleconference Access: Participants must call to be connected to the meeting. The telephone bridge number for non-Federal participants is 1/800/713-1971. The telephone bridge number for Federal participants is 404/639-4100. The conference code is: 351926. For security and confidentiality purposes, participants will not be connected to a conference call without a valid conference code. The conference name is "Epidemiology". For problems during the teleconference, press *0 at anytime to signal the attendant. For questions concerning technical aspects of the teleconference, please call 404/639-7550. Please note, the presentation will include visual aids that may not be readily understood by telephone participants.

Videoconference Access: Invited participants may access the meeting through Envision, at the following sites:

- (1) Centers for Disease Control and Prevention, Atlanta, Georgia.
- (2) Department of Education, Hubert H. Humphrey Building, Washington, DC.
- (3) University of North Carolina, Research Triangle Park, North Carolina.
- (4) University of Colorado, Ft. Collins, Colorado.
- (5) National Institute of Child Health and Human Development, Research Triangle Park, North Carolina.
- (6) Columbia University, New York, New York.

Status: This meeting is targeted for and will be presented at the graduate level of epidemiology. It may not be readily understood by the lay public. Due to limited time, questions will not be accepted from teleconference participants.

Purpose: Dr. Nigel Paneth, Department of Epidemiology at Michigan State University, will provide an overview of the epidemiology of newborn hearing screening. The presentation will be followed by a brief question and answer period.

Contact Person for More Information: Mike Adams, M.D., Division of Child Development, Disability, and Health (proposed), NCEH, CDC, 4770 Buford Highway, NE, M/S F-34, Atlanta, Georgia 30341. Telephone 770/488-7154, fax 770/488-7356.

The Director, Management Analysis and Services Office has been delegated the authority to sign Federal Register notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: February 24, 1999.

Carolyn J. Russell,

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

[FR Doc. 99-5086 Filed 3-1-99; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Food and Drug Administration**

[Docket No. 97N-484R]

Agency Information Collection Activities; Announcement of OMB Approval; Establishment Registration and Listing for Manufacturers of Human Cellular and Tissue-Based Products

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a collection of information entitled "Establishment Registration and Listing for Manufacturers of Human Cellular and Tissue-Based Products" has been approved by the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995.

FOR FURTHER INFORMATION CONTACT: JonnaLynn P. Capezzuto, Office of Information Resources Management (HFA-250), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-4659.

SUPPLEMENTARY INFORMATION: In the **Federal Register** of May 14, 1998 (63 FR 26744), the agency announced that the proposed information collection had been submitted to OMB for review and clearance under 44 U.S.C. 3507. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. OMB has now approved the information collection and has assigned OMB control number 0910-0372. The approval expires on July 31, 2001. A