health role and significance in population-based research of the genetics of congenital hearing impairment, (2) to develop strategies for population-based study of genetics of congenital hearing impairment, (3) to exchange ideas on the ethical and policy implications of public health research in the genetics of congenital hearing impairment, (4) to build partnerships between federal, state, academic, and private organizations to address activities for population genetics in congenital hearing impairment.

The workshop will provide a forum to discuss the strengths and limitations of several very specific study approaches that could be used to document the needed population-based research. We are particularly interested in strategies that involve collaboration with state-based Early Hearing Detection and Intervention (EHDI) programs. We are particularly interested in the perspectives of genetic ethicist; the deaf and hard-of-hearing communities; and state and local participants in universal newborn hearing detection and intervention programs.

Contact Persons for More Information: Kim Van Naarden, M.P.H., telephone 770/488–7184, or Marilyn Deal, telephone 770/488–7695, Division of Child Development, Disability, and Health, NCEH, CDC, 4770 Buford Highway, NE, Mailstop F–15, Atlanta, Georgia 30341. Fax 770/488–7361.

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: May 26, 1999.

Carolyn J. Russell,

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

[FR Doc. 99–13981 Filed 6–2–99; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Project

Title: State Plan for Foster Care and Adoption Assistance—Title IV–E.

OMB No.: 0980–0141.

Description: A State plan for foster care and adoption assistance is required by section 471 of the Social Security Act from any State wishing to claim Federal financial participation for foster care and adoption assistance. States may use a preprinted format or may develop their own format which meets the requirements of the law. The plan is submitted only once and amended as necessary. Our experience is that a State will amend a plan once every 4 years; approximately 12 per year.

Respondents: State, Local or Tribal Govt.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
State Plan for Foster Care and Adoption Assistance	12	1	15	180

Estimated Total Annual Burden Hours: 180.

In compliance with the requirements of Section 3506(c)(2)(A) the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above.

Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, S.W., Washington, D.C. 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) 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; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: May 27, 1999.

Bob Sargis,

Reports Clearance Officer.

[FR Doc. 99–13984 Filed 6–2–99; 8:45 am]

BILLING CODE 4184–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 99C–1455]

Genzyme Surgical Products Corp.; Filing of Color Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Genzyme Surgical Products Corp. has filed a petition proposing that the color additive regulations be amended to provide for the safe use of D&C Violet No. 2 as a color additive in absorbable sutures prepared from homopolymers of glycolide for general surgery. The petitioner also proposes that the nomenclature polyglactin 910 (glycolic-lactic acid polyester) be revised to the generic nomenclature-copolymers of 90 percent glycolide and 10 percent L-lactide.

FOR FURTHER INFORMATION CONTACT: Ellen M. Waldron, Center for Food Safety and Applied Nutrition (HFS–217), Food and Drug Administration, 200 C St. SW., Washington, DC 20204, 202–418–3089.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 721(d)(1) (21 U.S.C. 379e(d)(1)), notice is given that a color additive petition (CAP 9C0266) has been filed by Genzyme Surgical Products Corp., 600 Airport Rd., Fall River, MA 02720. The petition proposes to amend the color additive regulations in § 74.3602 *D&C Violet No. 2* (21 CFR 74.3602) to provide for the safe use of D&C Violet No. 2 as a color additive in absorbable sutures prepared from homopolymers of glycolide for general surgery. The