national competition for limited funding. The ORC will include at least 60 percent non-IHS, Federal or non-Federal individuals. Applications will be evaluated and rated on the basis of the application announcement criteria listed above. These criteria are used to evaluate the quality of a proposed project, to assign a numerical score to each application, and to determine the likelihood of its success. Applications will be funded in accordance with scores and funds available.

3. Results of the Review

The results of the objective review are forwarded to the Director, Office of Public Health, for final review and approval. The Director, OPH, will also consider recommendations from the Epidemiology Program and Grants Management Branch. After the Director, OPH, has made decisions on all applications, applicants are notified in writing within approximately 90 days of the closing date. Unsuccessful applicants will be notified in writing of disapproval. A brief explanation of the reasons why the application was not approved will be provided along with the name of the IHS official to contact if more information is desired.

VI. Award Administration Information

1. Award Notices

Successful applicants are notified through the official Notice of Cooperative Agreement (NCA) document. The NCA will state the amount of Federal funds awarded, the purpose of the cooperative agreement, the terms and conditions of the award, the effective date, the project, and budget period.

2. Administration and National Policy Requirements

Cooperative Agreement Administration Requirements: Cooperative agreements are administered in accordance with the following documents:

a. 45 CFR part 92, HHS Uniform Administrative Requirements for Grants and Cooperative Agreements to State, local, and tribal governments or 45 CFR part 74, Uniform Administrative Requirements for Awards and Subawards to Institutions of Higher Education, Hospitals, Other Nonprofit Organizations, and Commercial Organizations;

b. PHS Grants Policy Statement;

c. Appropriate Cost Principles: OMB Circulars A–87 ''State and Local Governments,'' or OMB Circular A–122 ''Non-Profit Organizations''; and

d. OMB Circular A–133 ''Audits of States, Local Governments, and Non-Profit Organizations.''

e. A–102, Grants and Cooperative Agreements with State and Local Governments.

f. A–110; Uniform Administrative Requirements for Grants and Other Agreements with Institutions of Higher Education, Hospitals, and Other Nonprofit Organizations.

3. Reporting Requirements

a. Progress Report—Program progress reports may be required semi-annually. These reports will include a brief description of a comparison of actual accomplishments to the goals established for the period, reasons for slippage, and other pertinent information as required. A final report is due 90 days after expiration of the project/budget period.

b. Financial Status Report—Semi-annually financial status reports will be submitted 30 days after the end of the half year. Final financial status reports are due 90 days after expiration of the project/budget period. Standard Form 269 (long form) will be used for financial reporting.

VII. Agency Contacts

For Epidemiology Program information, contact Dr. James Cheek (*james.cheek@ihs.gov*) or Dr. Nathaniel Cobb (*nathaniel.cobb@ihs.gov*), National Epidemiology Program, Indian Health Service, 5300 Homestead Road, NE., Albuquerque, NM 87110, (505) 837–4132, fax (505) 248–4393. For grant application and business management information, contact Ms. Martha Redhouse, Grants Management Branch, Indian Health Service, Twinbrook Metro Plaza, Suite 100, 123000 Twinbrook Metro Plaza, Rockville, Maryland 20852, (301) 443–5204. (The telephone numbers are not toll-free.)

Dated: June 21, 2004.

Charles W. Grim,

Assistant Surgeon General, Director, Indian Health Service.

[FR Doc. 04–14647 Filed 6–28–04; 8:45 am]

BILLING CODE 4160–16–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Indian Health Service

Special Diabetes Program for Indians Competitive Grant Program; Correction

ACTION: Notice; correction.

SUMMARY: The Indian Health Service published a document in the **Federal Register** on May 28, 2004. The document contained six errors.

FOR FURTHER INFORMATION CONTACT: Denise Clark, Grants Management Branch, Indian Health Service, Reyes Building, 801 Thompson Avenue, Rockville, MD 20852, Telephone (301) 443–5204. (This is not a toll-free number.)

Correction

In the **Federal Register** of May 28, 2004, in FR Doc. 04–12083, on page 30674, in the third column, section I, item 4 under Eligible Applicants, change the 1st sentence to read ''SDPI grant recipients and SDPI grant sub-recipients (Tribes who are members of a tribal consortium) are eligible to apply for the SDPI Competitive Grant Program if they are one of the following entities:''. On page 30677, in the third column, correct the deadline date of ''July 1, 2004'' in section B. to read ''July 15, 2004''. On page 30678, in the first column, section III, item 1 under Eligible Applicants change the 1st sentence to read ''Applicants eligible to receive an award under this announcement are SDPI grantees and SDPI grantee sub recipients.''. On page 30681, in the second column, Application Due Date, correct ''M.D.T.'' to ''E.D.T.''. On page 30682, in the first column, under Other Submission Requirements, in the third paragraph, correct the number ''222214'' to ''3''. And on page 30682, in the first column, Application Review Information, correct the SF number to read ''SF 424''.

Dated: June 21, 2004.

Charles W. Grim,

Assistant Surgeon General, Director, Indian Health Service.

[FR Doc. 04–14646 Filed 6–28–04; 8:45 am]

BILLING CODE 4160–16–M

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[FEMA–1513–DR]

Illinois; Amendment No. 3 to Notice of a Major Disaster Declaration

AGENCY: Federal Emergency Management Agency, Emergency Preparedness and Response Directorate, Department of Homeland Security.

ACTION: Notice.

SUMMARY: This notice amends the notice of a major disaster declaration for the State of Illinois (FEMA–1513–DR),