

encourage community changes that increase support for healthy marriages and improve child and family wellbeing.

The objective of the evaluation is to: (1) Assess the implementation of community interventions designed to provide marriage education by examining the way the projects operate and by examining child support outcomes among low-income families in the community; and (2) evaluate the

community impacts of these interventions on marital stability and satisfaction, child well-being and child support outcomes among low income families.

The purpose of this information collection is to conduct a follow-up survey of respondents from Wave 1 who live in the communities where CHMI demonstrations are operating, and a survey of CHMI program participants. The impact evaluation will assess the

effects of community healthy marriage initiatives by comparing family and child well-being outcomes in the CHMI communities with similar outcomes in comparison communities that are well matched to the demonstration project sites.

*Respondents:* Community members and program participants in CHMI treatment and comparison communities.

**ANNUAL BURDEN ESTIMATE**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per respondent	Estimated annual burden hours
Wave 2 Survey .....	4,120	1	.75	3,090

Estimated Total Annual Burden Hours: 3,090.

**Additional Information**

Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: OPRE Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: [OPREinfocollection@acf.hhs.gov](mailto:OPREinfocollection@acf.hhs.gov).

**OMB Comment**

OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Fax: 202-395-6974, Attn: Desk Officer for the Administration for Children and Families.

Dated: June 11, 2009.

**Seth F. Chamberlain,**

*OPRE Reports Clearance Officer.*

[FR Doc. E9-14181 Filed 6-18-09; 8:45 am]

**BILLING CODE 4184-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day-09-09AN]

**Agency Forms Undergoing Paperwork Reduction Act Review**

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov). Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

**Proposed Project**

National Youth Physical Activity and Nutrition Study (NYPANS)—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

The prevalence of obesity among adolescents aged 12 to 19 more than tripled in the past 20 years, increasing from 5% in 1980 to 17.6% in 2006. Obese young people are more likely than children of normal weight to become overweight or obese adults, and are therefore more at risk for associated adult health problems, including heart disease, type 2 diabetes, stroke, several

types of cancer, and osteoarthritis. However, healthy lifestyle habits, including healthy eating and physical activity, can lower the risk of becoming obese and developing related diseases.

CDC proposes to conduct a study involving a nationally representative sample of students attending public and private schools in grades 9-12. CDC will collect information from students in Spring 2010. The primary information collection will include a paper-and-pencil survey, a standardized protocol to measure height and weight, and telephone interviews to elicit 24-hour dietary recalls among a subsample of respondents. Information supporting the study also will be collected from school administrators and teachers.

The study will: (1) Provide nationally representative data on behaviors and behavioral determinants related to physical activity and nutrition; (2) provide data to help improve the clarity and strengthen the validity of questions on the Youth Risk Behavior Survey (OMB No. 0920-0493, exp. 11/30/2011), which has been conducted biennially since 1991; and (3) improve understanding of the associations among behaviors and behavioral determinants related to physical activity and nutrition, and their association with body mass index.

Study results will be used to develop more effective interventions for stemming the increase of obesity among adolescents, and will have implications for policy and program development for obesity prevention programs.

There are no costs to respondents except their time. The total estimated burden hours are 7,781.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State Education Agency Contacts .....	State Recruitment Script .....	17	1	30/60
School District Contacts .....	District Recruitment Script .....	80	1	30/60
School Administrators .....	School Recruitment Script .....	133	1	30/60
Teachers .....	Data Collection Checklist and Make-up Form	400	1	15/60
Students .....	NYPANS Questionnaire .....	8,000	1	45/60
	Height and Weight Record Form .....	8,000	1	3/60
	Student Contact Form .....	1,200	1	2/60
	24-Hour Dietary Recall Interview Script .....	750	3	30/60

Dated: June 15, 2009.  
**Maryam I. Daneshvar,**  
*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*  
 [FR Doc. E9-14411 Filed 6-18-09; 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 Projects**

*Title:* Head Start Eligibility Verification.  
*OMB No.:* New Collection.  
*Description:* The requirements for establishing proof of eligibility for the

enrollment of children in Head Start programs are documented in 45 CFR 1305.4(e). Each child's record must include a signed document by an employee identifying those documents which were reviewed to determine eligibility. Presently there is no uniform document which the employee must sign. This form will be used to facilitate an efficient and accurate determination of childrens' eligibility for Head Start enrollment.

*Respondents:* Head Start grantees.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Head Start Eligibility Verification .....	1,600	750	0.08	96,000

Estimated Total Annual Burden Hours: 96,000.

In compliance with the requirements of Section 506(c)(2)(A) of 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 Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). 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: June 16, 2009.  
**Janean Chambers,**  
*Reports Clearance Officer.*  
 [FR Doc. E9-14482 Filed 6-18-09; 8:45 am]  
**BILLING CODE 4184-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Food and Drug Administration**

[Docket No. FDA-2009-N-0262]

**Clinical Trials Transformation Initiative (U19)**

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the availability of grant funds to support the Clinical Trials Transformation Initiative (CTTI). The goal of CTTI is to support modernization of the clinical trial enterprise by identifying practices that will enhance human subject protection, boost the quality of information derived from clinical trials, and make the research process more efficient.

**DATES:** Important dates are as follows:

1. The application is due by: July 6, 2009.
2. The anticipated start date is in: September 2009.