

process paper records. The application process includes the following: Submission of responses to the questions in the online application; submission of academic transcripts and letters of recommendation; a review by selected programmatic staff and panel member experts; selection of qualified candidates for interview; interview of candidates; and selection of trainees for the fellowship programs.

The online application questions ask for academic history, professional experience, names of references, and description of professional goals. The application questions and data collected are necessary to the application process to determine programmatic eligibility and to ensure that the most highly qualified candidates are chosen for the training programs.

The alumni directory will allow CDC to maintain a current, centralized electronic database. Questions include updates to include email and other

contact information, professional responsibilities, medical certifications, qualifications, and scientific skills in the event that it becomes necessary to contact alumni possessing mission-critical skills to meet a national public health emergency or an urgent public health need. Alumni data will also be used by CDC to document the impact of the fellowships on the career paths of participants, and thus, on the science and practice of public health, and by the alumni for maintaining their professional networks for finding jobs, staffing jobs, collaborating, and interacting with their fellow alumni.

Alumni will have two options for the level of information they wish to be visible to other alumni of their fellowship. They will have the option of displaying only their name, fellowship year, and professional information or all of their information. The default is to display only their name, fellowship

year, and professional information. This information is already in the public domain.

The annual burden table has been updated to reflect an increase in the number of fellowships participating in FMS.

The estimated annualized burden for all nine fellowship applications is 748 hours (1,122 respondents × 40 minutes for completing the application), and the estimated annualized burden for all twelve directories is 114 hours (454 respondents × 15 minutes for updating their information). **Note:** Some alumni are deceased or cannot be located. Response burden assumes response from an individual responding alumnus, on average, every 3 years (which is likely an overestimate of frequency). There is no cost to respondents other than their time. The total estimated annualized burden hours are 862.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Number of respondents	Frequency of Response	Average annualized burden per response (in hours)
Fellowship applicants .....	1122	1	40/60
Fellowship alumni .....	454	1	15/60

Dated: December 9, 2010.

**Carol E. Walker,**

*CDC Reports Clearance Officer, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[60Day-11-11BB]

**Proposed Data Collections Submitted for Public Comment and Recommendations**

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 and send comments to Carol Walker, CDC

Acting Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov).

Comments are invited 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) 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. Written comments should be received within 60 days of this notice.

**Proposed Project**

Crime Prevention Through Environmental Design: Linking Observed School Environments With Student and School-Wide Experiences of Violence and Fear—New—Division of Violence Prevention (DVP), National Center for Injury Prevention (NCIPC),

Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

Among the goals of the Centers for Disease Control and Prevention (CDC), National Center for Injury Prevention and Control (NCIPC) is to reduce the prevalence of violence among youth. Several important priorities included in the Center's published research agenda focus on studying how physical environments influence behavior and risk for violence. The CDC has developed an observational tool called the Crime Prevention Through Environmental Design (CPTED) School Assessment (CSA) to assess the extent to which the physical characteristics of schools are consistent with Crime Prevention Through Environmental Design (CPTED) principles. The proposed research will allow an assessment of the validity of the CSA by examining the extent to which the CSA subscales, total CSA scores, and CPTED principles are related to fear and violence, and related variables. If the CSA tool is shown to measure characteristics of the school environment that are associated with fear and violence-related behaviors in

school, then it may be used as the basis for research, design, and evaluation of interventions for schools seeking to prevent or reduce the occurrence of crime and violence by providing information related to (re)designing physical features of the environment and changing policies and procedures related to using the school environment.

In addition, an exploratory purpose of this research is to determine whether the CSA items can be divided reliably into supposedly distinct variables reflecting each of the CPTED principles. If we produce practical support for the

assessment of these “CPTED variables,” then we will also assess validity by determining whether these variables are logically related to our measures of fear, violence and climate in schools.

Survey data from 75 students (25 each from 6th, 7th, and 8th grades) per school site will be collected from 50 middle schools selected and recruited from 13 school districts in the metro-Atlanta, Georgia area (approximately 3,750 total student participants), in addition to the observational (CSA) data collection. The student survey will assess variables such as school climate, and actual and

perceived levels of school violence at each school. In addition, archival/ administrative data will be collected from each of the 50 schools on a School Site Data Form providing information on neighborhood and school characteristics from various sources (e.g., school site information reported by the school administrator, school district data available on the Web, U.S. Census data, and school disciplinary records). There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Average burden response (in hours)	Total burden (in hours)
CPTED Student Survey .....	3,750	1	1	3750
CPTED Student Survey Data Collection Checklist (DCC) .....	150	1	0.5	75
CPTED School Site Data Form .....	50	1	2	100
<b>Total</b> .....				<b>3925</b>

Dated: December 9, 2010.

**Carol E. Walker,**

*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Centers for Disease Control and Prevention/Health Resources and Services Administration (CDC/HRSA) Advisory Committee on HIV and STD Prevention and Treatment: Notice of Charter Renewal**

This gives notice under the Federal Advisory Committee Act (Pub. L. 92-463) of October 6, 1972, that the CDC/HRSA Advisory Committee on HIV and STD Prevention and Treatment, Department of Health and Human Services, has been renewed for a 2-year period through November 25, 2012.

*Contact Person for More Information:* Kevin Fenton, M.D., PhD, Designated Federal Officer, CDC/HRSA Advisory Committee on HIV and STD Prevention and Treatment, Department of Health and Human Services, CDC, 1600 Clifton Road, NE., Mailstop E07, Atlanta, Georgia 30333, telephone (404)639-8000 or fax (404)639-8600.

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: December 13, 2010.

**Elaine L. Baker,**

*Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Disease, Disability, and Injury Prevention and Control Special Emphasis Panel (SEP): Pilot Longitudinal Data Collection To Inform Public Health—Fragile X Syndrome, DD11-007, Initial Review**

In accordance with Section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the aforementioned meeting:

*Time and Date:* 11 a.m.–5 p.m., April 15, 2011 (Closed).

*Place:* Teleconference.

*Status:* The meeting will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92-463.

*Matters To Be Discussed:* The meeting will include the initial review, discussion, and evaluation of “Pilot Longitudinal Data Collection to Inform Public Health—Fragile X Syndrome, DD11-007, initial review.”

*Contact Person for More Information:*

Donald Blackman, PhD, Scientific Review Officer, CDC, National Center for Chronic Disease Prevention and Health Promotion, Office of the Director, Extramural Research Program Office, 4770 Buford Highway, NE., Mailstop K-92, Atlanta, GA 30341, Telephone: (770) 488-3023, E-mail: [DBY7@cdc.gov](mailto:DBY7@cdc.gov).

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: December 13, 2010.

**Elaine L. Baker,**

*Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.*

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