Form	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Patient Navigator Cultural Competency Checklist	10	4.60	46.00	1.170	53.82
Patient Navigator/Health System Administrator Focus Group	50	1.00	50.00	1.000	50.00
Grantee Health Care Provider Focus Group	30	1.00	30.00	1.000	30.00
Social Service Provider Group	50	1.00	50.00	1.000	50.00
Quarterly Report	10	4.00	40.00	1.000	40.00
Sub Total-Grantee Burden	*165*				*1,084.41*
Totals	5,038		49,392.6		12,046.76

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to the desk officer for HRSA, either by email to *OIRA_submission@omb.eop.gov* or by fax to 202–395–6974. Please direct all correspondence to the ''attention of the desk officer for HRSA.''

Dated: June 7, 2012.

Reva Harris,

Acting Director, Division of Policy and Information Coordination.

[FR Doc. 2012–14324 Filed 6–12–12; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request: Clinical Mythteries: A Video Game About Clinical Trials

SUMMARY: 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 National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection: Title: Clinical Mythteries: A Video Game About Clinical Trials. *Type of Information Collection Request:* NEW. *Need and Use of Information Collection:* New England Research Institutes as a contractor for the National Heart Lung and Blood Institute is planning to create an engaging, informational ''serious video game'' for adolescents about clinical studies which: (1) Incorporates core learning objectives; and (2) dispels misconceptions. Two types of information collection are planned:

- usability testing to understand game-play/usability. This information will be collected by focus group and will be digitally recorded 90 minute groups.
- A pre/post randomized trial to measure change in knowledge. This information will be collected electronically through on-line questionnaire.

The game will be incorporated with a larger initiative to provide information about clinical research (*http://www.nhlbi.nih.gov/childrenandclinicalstudies/index.php*). *Frequency of Response:* Once. *Affected Public:* Individuals. *Type of Respondents:* Adolescents—aged 8–14.

The annual reporting burden is as follows: *Estimated Number of Respondents:* 6,148; Estimated *Number of Responses per Respondent:* 1; Average *Burden Hours Per Response: 1.321;* and *Estimated Total Annual Burden Hours Requested:* 370. The annualized cost to respondents is estimated at: $3,700. There are no Capital Costs to report. The Operating Costs to collect this information is estimated at $38,642.

Note: The following table should be the same table from section A.12 of the supporting statement.

Type of respondents	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total annual burden hours requested
Adolescents—Wave one	30	1	1.5	45
Adolescents—Wave two	250	1	1.3	325
Total				370

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Victoria Pemberton, RNC, MS, CCRC, National Heart, Lung and Blood Institute, 6701 Rockledge Drive, Rm. 8109, Bethesda, MD 20892, or call non-toll-free number (301) 435–0510 or Email your request, including your address to: *pembertonv@mail.nih.gov*.

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 60-days of the date of this publication.

Dated: May 30, 2012.

Michael Lauer,

Director, Division of Cardiovascular Diseases, National Heart, Lung, and Blood Institute, NIH.

Dated: June 4, 2012.

Lynn Susulske,

NHLBI Project Clearance Liaison, National Institutes of Health.

[FR Doc. 2012–14437 Filed 6–12–12; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request: Process Evaluation of the Early Independence Award (EIA) Program

SUMMARY: 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 Office of Strategic Coordination (OSC), Division of Program Coordination, Planning, and Strategic Initiatives (DPCPSI), National Institutes of Health (NIH), will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection: Title: Process Evaluation of the Early Independence Award (EIA) Program. *Type of Information Collection Request:* NEW. *Need and Use of Information Collection:* This study will assess the EIA program operations. The primary objectives of the study are to (1) assess if the requests for applications (RFAs) are meeting the needs of applicants, (2) document the selection process, (3) document EIA program operations, (4) assess the progress being made by the Early Independence Principal Investigators, and (5) assess the support provided by the Host Institutions to the Early Independence Principal Investigators.

The findings will provide valuable information concerning (1) aspects of the program that could be revised or improved, (2) progress made by the Early Independence Principal Investigators, and (3) implementation of the program at Host Institutions.

Frequency of Response: On occasion. *Affected Public:* None. *Type of Respondents:* Applicants, reviewers, and awardees. The annual reporting burden is as follows: *Estimated Number of Respondents:* 390; *Estimated Number of Responses per Respondent:* 1; Average *Burden Hours per Response:* 4*;* and *Estimated Total Annual Burden Hours Requested:* 158. The annualized cost to respondents is estimated at: $9,774. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

A.12.1—ANNUALIZED ESTIMATE OF HOUR BURDEN

Type of respondents	Number of respondents (average) [1]	Frequency of response	Average time per response (min.)	Annual hour burden [2]
Editorial Board Reviewers (paper survey)	15	1	15	4
Applicants—Principal Investigators (online survey)	150	1	15	38
Applicants—Officials of Host Institutions (online survey)	150	1	15	38
Awardees—Early Independence Principal Investigator (paper survey—beginning of 1st year of award)	12	1	30	6
Awardees—Early Independence Principal Investigator (phone interview—end of 1st year of award)	12	1	60	12
Awardees—Early Independence Principal Investigator (online survey—end of 2nd and 3rd year of award)	24	1	60	24
Awardees—Point of Contact at Host Institution (phone interview—end of 1st year of award)	12	1	60	12
Awardees—Point of Contact at Host Institution (online survey—end of 2nd and 3rd year of award)	24	1	60	24
Total	.....	.....	.....	158

Request for Comments: Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Ravi Basavappa, OSC, DPCPSI, Office of the Director, NIH, 1 Center Drive, MSC 0189, Building 1, Room 203, Bethesda, MD 20892–0189; telephone 301–594–8190; fax 301–435–7268; or email your request, including your address, to *earlyindependence@mail.nih.gov.*

Comments Due Date: Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: June 6, 2012.

Lawrence A. Tabak,

Deputy Director, National Institutes of Health.

[FR Doc. 2012–14464 Filed 6–12–12; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request: Opinions and Perspectives About the Current Blood Donation Policy for Men Who Have Sex With Men

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Heart, Lung, and Blood Institute