

DATES: Comments must be received on or before June 5, 2026.

ADDRESSES: Comments must be submitted through www.regulations.gov.

FOR FURTHER INFORMATION CONTACT:
Program-Specific information: Kendra McCleave, 202–495–8241, kendra.mccleave@va.gov.
VA PRA information: Dorothy Glasgow, 202–461–1084, VAPRA@va.gov

SUPPLEMENTARY INFORMATION: Under the PRA of 1995, Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VBA invites comments on: (1) whether the proposed collection of information is necessary for the proper performance of VBA's functions, including whether the information will have practical utility; (2) the accuracy of VBA's estimate of the burden of the proposed collection of information; (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 respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Title: Edith Nourse Rogers STEM Scholarship Application, VA Form 22–10203.

OMB Control Number: 2900–0878. <https://www.reginfo.gov/public/do/PRAsearch>. (Once at this link, you can enter the OMB Control Number to find the historical versions of this Information Collection).

Type of Review: Revision of a currently approved collection.

Abstract: Section 111 of Public Law 115–48, Section 3320 authorizes VA to administer the Edith Nourse Rogers STEM Scholarship Program. Under the program, VA provides up to 9 months or \$30,000 of Post-9/11 GI Bill benefits to certain eligible individuals selected by the Secretary of VA. To apply for and receive the scholarship, an individual must complete the application, VA Form 22–10203. VA continues to require approval of this information collection so students can continue to apply, and for VA to continue to assess how to prioritize the awarding of the Scholarship, based on the information collected on the form. This collection renewal resulted in a decrease in burden hours due to a significant decrease in the initial number of scholarship

applicants that submitted an application for the program during the periods from 2022 and 2023.

Affected Public: Individuals or Households.

Estimated Annual Burden: 2,788 hours.

Estimated Average Burden Time per Respondent: 15 minutes.

Frequency of Response: Once.

Estimated Number of Respondents: 11,150.

(Authority: 44 U.S.C. 3501 *et seq.*)

Dorothy Glasgow,

Acting, VA PRA Clearance Officer, Office of Information Technology/Data Governance Analytics, Department of Veterans Affairs.

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DEPARTMENT OF VETERANS AFFAIRS

Veterans Rural Health Advisory Committee

AGENCY: Department of Veterans Affairs.

ACTION: Notice of intent for reestablishment.

SUMMARY: We are giving notice that the Secretary of Veterans Affairs intends to reestablish the Department of Veterans Affairs Veterans Rural Health Advisory Committee for a 2-year period. The Secretary has determined that the Committee is necessary and in the public interest.

FOR FURTHER INFORMATION CONTACT: Jeffrey Moragne, Committee Management Office, Department of Veterans Affairs, Advisory Committee Management Office (00AC), 811 Vermont Avenue, 4th Floor, NW, Washington, DC 20420; telephone (202) 714–1578; or email at Jeffrey.Moragne@va.gov.

SUPPLEMENTARY INFORMATION: Pursuant to the Federal Advisory Committee ACT, notice is hereby given that the Secretary of Veterans Affairs (VA) intends to reestablish the Veterans Rural Health Advisory Committee (Committee or VRHAC) for two (2) years from the filing date of the charter's reestablishment. The purpose of the Committee is to advise the Secretary of VA on rural health care issues affecting Veterans. The VHRAC examines programs and policies that impact the delivery of VA rural health care to Veterans and discusses ways to improve and enhance VA access to rural health care services for Veterans.

In addition, pursuant to 41 CFR 102–3.65, the Department of Veterans Affairs provides this written notice

determination stating that the Committee is in the public interest and found to be in accordance with the Federal Advisory Community Act (FACA), the 2025 FACA Final Rule, and current to the U.S. General Services Administration, Committee Management Secretariat guidance. The following factors below provide an overview of the Committee's operations and public interest intent.

Annual Budget—The overall operating costs for the Committee is \$184,169. All members receive travel expenses and a per diem allowance in accordance with the Federal Travel Regulation for any travel made in connection with their duties as members of the Committee. The expected costs are broken into:

(i) Federal personnel (based on full-time equivalent (FTE) usage basis) is .80 with other Federal internal costs being \$135,369.

(ii) Proposed payments to Non-Federal Members is \$3,218. Payments to Federal Members are \$7,081. The Committee is composed of not more than 12 appointed members and up to 3 ex-officio members.

(iii) Reimbursable costs equate to travel reimbursement for Non-Federal Members is \$11,230, for Federal Members is \$3,671 and for Federal Staff is \$23,600.

This Committee does not have any dollar value of grants expected for the fiscal year.

Membership Selection—The Committee's membership includes academic experts in rural health care delivery, state and federal government professionals who focus on rural health issues, Department of Veterans Affairs officials at the state level, and selected Veterans service organization leaders. VHRAC members range from patient care advocates to medical policy strategists. Additionally, the Committee works with the Department's Advisory Committee Management Office, the Committee Chair, and the Office of Rural Health (ORD) leadership to ensure the committee is balanced, to the extent possible, diversity ethnically and geographical background representation.

Existing Federal Advisory Committees—The following list are the 27 VA advisory committees includes 18 that are statute (with an asterisk *) and 9 non-statutory committees.

- (1) VA National Academic Affiliations Council
- * (2) Advisory Committee on Cemeteries and Memorials
- (3) Cooperative Studies Scientific Evaluation Committee
- * (4) Advisory Committee on Disability Compensation

- * (5) Veterans' Advisory Committee on Education
- * (6) Veterans' Advisory Committee on Environmental Hazards (Administratively Inactive)
- * (7) Advisory Committee on Former Prisoners of War
- * (8) Geriatrics and Gerontology Advisory Committee
- * (9) Research Advisory Committee on Gulf War Veterans' Illnesses
- (10) Health Systems Research Service Merit Review Board
- * (11) Advisory Committee on Homeless Veterans
- (12) Joint Biomedical Laboratory Research and Development and Clinical Science Research and Development Services Scientific Merit Review Board
- * (13) Advisory Committee on Minority Veterans
- (14) National Research Advisory Council
- * (15) Advisory Committee on U.S. Outlying Areas and Freely Associated States
- * (16) Advisory Committee on Prosthetics and Special Disabilities Programs
- * (17) Advisory Committee on the Readjustment of Veterans
- * (18) Veterans' Advisory Committee on Rehabilitation
- (19) Rehabilitation Research and Development Service Scientific Merit Review Board
- (20) Veterans' Rural Health Advisory Committee
- * (21) Special Medical Advisory Group
- * (22) Advisory Committee on Structural Safety of Department of Veterans Affairs Facilities
- * (23) Advisory Committee on Tribal and Indian Affairs
- (24) Veterans' Family, Caregiver, and Survivor Advisory Committee
- * (25) Veterans and Community Oversight and Engagement Board
- (26) Department of Veterans Affairs Voluntary Service National Advisory Committee
- * (27) Advisory Committee on Women Veterans

Justification—VRHAC continues to provide valuable external rural health stakeholder perspective regarding rural health care and the challenges of accessing and delivering services in rural and highly rural areas. Stakeholder representation of Federal, state, regional, and local organizations is good; though proposed solutions to overcoming challenges specific to rural Veterans are often limited by implementation feasibility in the VA and the Veterans Health Administration.

Summary of Previous Committee Accomplishments—The Committee's standard operations entail conducting one local meeting in Washington, DC to receive updates from VA Senior Leaders, and one site visit to a VA facility with a high concentration of rural Veterans. Its meetings focus on evaluating the programs and initiatives of VHA's ORD and its VHA program

office partners; and on recommending ways to improve. The Committee evaluates current VA rural health program activities and identifies existing barriers to rural health services. It recommends strategies to improve those services for Veterans to the Secretary of Veterans Affairs.

Why Committee is Essential—VRHAC provides advice and recommendations to the Secretary of Veterans Affairs on health care issues that affect Veterans residing in rural areas. The Committee meets at least twice annually to discuss programs and policies that impact the provision of VA health care to Veterans. This is obtained from its committee meetings and through the valuable external rural health stakeholder perspective regarding rural health care and the challenges of accessing and delivering services in rural and highly rural areas.

In conclusion, this Notice of Reestablishment states that this Committee is in the public interest, essential to the conduct of agency business and that the information provided is not available through any other advisory committee or source within the Federal Government.

Dated: April 2, 2026.

LaTonya L. Small,
Federal Advisory Committee Management Officer.

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