

to make available to ACF pre-award review and procurement documents, such as request for proposals or invitations for bids, independent cost estimates, etc.

Note: Whenever the applicant intends to delegate part of the project to another agency, the applicant must provide a detailed budget and budget narrative for each delegate agency, by agency title, along with the required supporting information referred to in these instructions.

6g. Other:

Enter the total of all other costs. Such costs, where applicable and appropriate, may include but are not limited to insurance, food, medical and dental costs (noncontractual), professional services costs, space and equipment rentals, printing and publication, computer use, training costs, such as tuition and stipends, staff development costs, and administrative costs.

Justification: Provide computations, a narrative description and a justification for each cost under this category.

6h. Indirect Charges:

Description: Total amount of indirect costs. This category should be used only when the applicant currently has an indirect cost rate approved by the Department of Health and Human Services (HHS) or another cognizant Federal agency.

Justification: An applicant that will charge indirect costs to the grant must enclose a copy of the current rate agreement. If the applicant organization is in the process of initially developing or renegotiating a rate, it should immediately upon notification that an award will be made, develop a tentative indirect cost rate application based on its most recently completed fiscal year in accordance with the principles set forth in the cognizant agency's guidelines for establishing indirect cost rates, and submit it to the cognizant agency. Applicants awaiting approval of their indirect cost applications may also request indirect costs. It should be noted that when an indirect cost rate is requested, those costs included in the indirect cost pool should not also be charged as direct costs to the grant. Also, if the applicant is requesting a rate which is less than what is allowed under the program, the authorized representative of the applicant organization must submit a signed acknowledgement that the applicant is accepting a lower rate than allowed.

6i. Program Income:

Description: The estimated amount of income, if any, expected to be generated from this project.

Justification: Describe the nature, source and anticipated use of program income in the budget or refer to the pages in the application which contain this information.

B. Other Forms, Assurances, and Certifications

Standard Form 424: Application for Federal Assistance

Standard Form 424A: Budget Information

Standard Form 424B: Assurances—Non-Construction Programs

Certification Regarding Debarment
Certification Regarding Drug-Free Workplace

Form LLL: Disclosure of Lobbying
Certification Regarding Environmental Tobacco Smoke

State Single Point of Contact (SPOC) Listing

All forms are available online at:
<http://www.acf.dhhs.gov/programs/ofsf/grants/form.htm>.

The SPOC listing is available on line at <http://www.whitehouse.gov/omb/grants/spoc.html>.

Dated: May 29, 2001.

James A. Harrell,

Acting Commissioner, Administration on Children, Youth and Families.

[FR Doc. 01-13921 Filed 6-1-01; 8:45 am]

BILLING CODE 4184-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Public Law 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft

instruments, call the HRSA Reports Clearance Officer on (301) 443-1129.

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.

Proposed Project: The Health Education Assistance Loan (HEAL) Program: Refinancing Loan Application/Promissory Note (OMB No. 0915-0227)—Revision—The HEAL Program allows borrowers who graduated or separated from school to refinance all of their HEAL loans into one new HEAL loan, often at better rates and terms than their original HEAL loans. The HEAL program originally provided new federally-insured loans to students in schools of allopathic medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, graduate students in health administration or clinical psychology through September 30, 1998. Eligible lenders, such as banks, savings and loan associations, credit unions, pension funds, insurance companies, State agencies, and HEAL schools are insured by the Federal Government against loss due to the borrower's death, disability, bankruptcy, and default. The basic purpose of the program was to assure the availability of funds for loans to eligible students who needed to borrow money to pay for their educational costs.

The HEAL refinancing loan application/promissory note is being used by lenders to refinance borrower's original HEAL loans into one new refinanced loan. Due to the success of this form and desire to reduce application processing time, many lenders have automated this form by and taking pertinent application information over the telephone and sending the completed form to the borrower for their review and signature.

The estimate of burden for the refinancing loan application/promissory note form per year is as follows:

| Type of respondent | Number of respondents | Responses per respondent | Total number of responses | Burden per responses (minutes) | Total burden hours |
|--------------------|-----------------------|--------------------------|---------------------------|--------------------------------|--------------------|
| Applicants | 1,850 | 1 | 1,850 | 12 | 370 |
| Lenders | 9 | 206 | 1,854 | 30 | 927 |
| Total | 1,859 | | 3,704 | | 1,297 |

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: May 25, 2001.

Jane M. Harrison,

Director, Division, of Policy Review and Coordination.

[FR Doc. 01-13850 Filed 6-1-01; 8:45 am]

BILLING CODE 4160-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, Public Health Service, DHHS.

ACTION: Notice.

SUMMARY: The inventions listed below are owned by agencies of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by writing to the indicated licensing contact at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852-3804; telephone: 301/496-7057; fax: 301/402-0220. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

PRAC & PRAC-Y: Small Nuclear Proteins Found in Prostate and Colon Cancer, and Uses Thereof

Ira Pastan et al. (NCI)

DHHS Reference No. E-053-01/0, filed 09 Apr 2001

Licensing Contact: Richard Rodriguez; 301/496-7056, ext. 287; e-mail: rodrigur@od.nih.gov

Prostate cancer is the most commonly diagnosed cancer and the second leading cause of cancer death in males in the United States. Currently, there are no curative therapies available for this cancer and therefore, novel approaches are needed to treat this disease. The present invention claims a small, nuclear protein, PRAC (Prostate/Rectum And Colon Protein) that could be used to diagnose and/or treat prostate or colon cancers. In conjunction with the composition of matter claims, defined methods of use might include: (1) Immunogenic fragments to elicit T cell responses against cells that express PRAC; (2) gene therapy applications through the use of appropriate expression vectors containing the nucleic acid sequences of PRAC; (3) detection and potential staging of cancers expressing PRAC. These disclosed technologies could provide new and exciting methodologies to treat prostate and/or colon cancer.

Biologically Active Macrolides, Compositions and Uses Thereof

Michael R. Boyd (NCI), Kirk R.

Gustafson (NCI), and Charles L. Cantrell (USDA)

DHHS Reference No. E-203-00/0, filed 24 Jul 2000

Licensing Contact: Elaine White; 301/496-7056, ext. 282; e-mail: gese@od.nih.gov

The current invention embodies the identification of a novel class of potent vacuolar-type (H⁺)-ATPase-inhibitory compounds. Vacuolar-type (H⁺)-ATPases are present in many tissues and cells of the body and are involved in the maintenance of various physiological functions. The modification of these functions, via inhibition of vacuolar-type (H⁺)-ATPases, may represent an effective means of treating various disease states, including Alzheimer's disease, glaucoma, and osteoporosis. In addition, these inhibitors may also be of particular value for use against cancer, as vacuolar-type (H⁺)-ATPases have been implicated in processes relating to cellular proliferation, angiogenesis, tumor cell invasiveness, metastasis, and drug resistance.

Dated: May 24, 2001.

Jack Spiegel,

Director, Division of Technology, Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. 01-13886 Filed 6-1-01; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, Public Health Service, DHHS.

ACTION: Notice.

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ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by contacting Peter A. Soukas, J.D., at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852-3804; telephone: 301/496-7056 ext. 268; fax: 301/402-0220; e-mail: soukasp@od.nih.gov. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

Identification of New Small RNAs and ORFs

Susan Gottesman (NCI), Gisela Storz (NICHD), Karen Wassarman (NICHD), Francis Repoila (NCI), Carsten Rosenow (EM)

DHHS Reference No. E-072-01/0, filed 01 Feb 2001

The inventors have isolated a number of previously unknown sRNAs found in *E. coli*. Previous scientific publications by the inventors and others regarding