## Leroy A. Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2016–19460 Filed 8–15–16; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[Docket No. CDC-2016-0083; 60Day-16-16AWM]

### Proposed Data Collection Submitted for Public Comment and Recommendations

**AGENCY:** Centers for Disease Control and Prevention, Department of Health and Human Services.

**ACTION:** Notice with comment period.

**SUMMARY:** Centers for Disease Control and Prevention as part of its continuing efforts to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on this proposed information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on the Executive and Scientific Resources Office Access Management System (EAMTS). EAMTS is designed to house all Guest Researcher & ORISE program packets, **Appointment Mechanism Determination** Forms, and Title 42 Fellowship Immigration information in one central location on the Human Resources Office SharePoint Server.

**DATES:** Written comments must be received on or before October 17, 2016. **ADDRESSES:** You may submit comments, identified by Docket No. CDC–2016–0083 by any of the following methods: Federal eRulemaking Portal: *Regulations.gov.* Follow the instructions for submitting comments.

*Mail:* Jeffrey M. Zirger, Acting Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS– D74, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to *Regulations.gov*, including any personal information provided. For access to the docket to read background documents or comments received, go to *Regulations.gov*. **Note:** All public comment should be submitted through the Federal eRulemaking portal (*Regulations.gov*) or by U.S. mail to the address listed above.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact the Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS–D74, Atlanta, Georgia 30329; phone: 404–639–7570; Email: *omb@cdc.gov.* 

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires Federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

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; (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; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information; to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review

the collection of information; and to transmit or otherwise disclose the information.

# **Proposed Project**

Data Management for Executive and Scientific Resources Access Management Tracking System—New— Executive and Scientific Resource Office (ESRO), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

ESRO seeks to submit and information collection request for approval of information collections through its ESRO Access Management Tracking System (EAMTS). This system will automate current manual processes for programs managed by ESRO. This new process will provide users a single, integrated location to allow for collaboration, faster processing between the programs and ESRO and a better onboarding experience for potential fellows.

EAMTS will support users by providing a single, integrated location for enterprise content management, manage documents and records by using workflows an information rights management. This business process will allow ESRO to design forms that are accessible in SharePoint through a Web Browser. Team members will be able to access critical business information, analyze and view data, and publish reports to make more informed decisions.

EAMTS will allow CIO's to submit digital packets including Guest Researcher, ORISE, Title 42 Fellowship Visa request (portion of CDC 0.1475) and Appointment Mechanism **Determination Request Form (CDC** 0.4601). CIO's can upload supplemental documentation as an attachment to each application, electronically track and monitor status of application, digitally sign forms and requests, receive case determinations quickly and accurately, and track the Visa status of Title 42 Fellowship requests that require Visa assistance from the Human Resources Office.

EAMTS is developed in SharePoint for CDC's Centers/Institutes/Offices (CIO) to submit required information for all of Executive and Scientific Resource Office's managed programs and for these CIO's to effectively and efficiently digitally review this information. Data is managed and maintained by appropriate CIO Staff with ground and form level permission.

Permissions to EAMTS are required to access the lists, forms, and document library. This includes entering data, clearing/approving forms, processing forms, and acknowledging data entered.

The total estimated annualized burden hours for all respondents are 1,280. There are no costs to respondents other than their time. CDC will seek a three-year approval from OMB.

# ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per CIO	Average burden per response (in hours)	Total burden (in hours)
Initiator/C/I/O Initiator/C/I/O Initiator/C/I/O Initiator/C/I/O	CDC 0.4601 CDC 0.410A CDC 0.410B Section C of the CDC 0.1475	64 64 64 64	5 5 5 5	1 1 1 1	320 320 320 320
Totals					1,280

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Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

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### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### National Institutes of Health

# National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Allergy and Infectious Diseases Special Emphasis Panel; NIAID Clinical Trial Implementation Cooperative Agreement (U01).

Date: September 22, 2016.

*Time:* 10:00 a.m. to 12:00 p.m. *Agenda:* To review and evaluate grant applications.

*Place:* National Institutes of Health, Room 3F100, 5601 Fishers Lane, Rockville, MD 20892 (Telephone Conference Call).

*Contact Person:* Lynn Rust, Ph.D., Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, Room 3G42A, National Institutes of Health/ NIAID, 5601 Fishers Lane, MSC 9823, Bethesda, MD 20892–9823, (240) 669–5069, lrust@niaid.nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: August 10, 2016.

#### Natasha M. Copeland,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2016–19417 Filed 8–15–16; 8:45 am] BILLING CODE 4140–01–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

# National Institutes of Health

Prospective Grant of Start-Up Exclusive Evaluation Option License Agreement: Small Molecule Therapeutic Compounds Encompassed Within the Licensed Patent Rights for the Treatment of Thioesterase Deficiency Disorder

**AGENCY:** National Institutes of Health, HHS.

# ACTION: Notice.

**SUMMARY:** This notice, in accordance with 35 U.S.C. 209 and 37 CFR part 404, that the National Institutes of Health, Department of Health and Human Services, is contemplating the grant of a Start-Up Exclusive Evaluation Option License Agreement to practice the inventions embodied in the following Patent Applications to Circumvent Pharmaceuticals Inc. ("Circumvent") located in Pasadena, California, USA:

### **Intellectual Property**

United States Provisional Patent Application No. 61/473,692, filed April 8, 2011, titled "Small molecule therapeutic compounds targeting thioesterase deficiency disorders and methods of using the same" [HHS Reference No. E–157–2011/0–US–01], status: Expired;

International Patent Application No. PCT/US2012/32772 filed April 9, 2012 titled "Small molecule therapeutic compounds targeting thioesterase deficiency disorders and methods of using the same" [HHS Reference No. E– 157–2011/0–PCT–02], status: Converted;

European Patent Application No. 12716889.6, filed November 7, 2013, titled "Small molecule therapeutic compounds targeting thioesterase deficiency disorders and methods of using the same" [HHS Reference No. E– 157–2011/0–EP–03], status: Pending; and

United States Patent Application No. 14/110,393, filed October 7, 2013, titled "Small molecule therapeutic compounds targeting thioesterase deficiency disorders and methods of using the same" [HHS Reference No. E– 157–2011/0–US–04], status: Pending.

The patent rights in these inventions have been assigned and/or exclusively licensed to the government of the United States of America.

The territory of the prospective Start-Up Exclusive Evaluation Option License Agreement may be worldwide and the field of use may be limited to: "Small molecule therapeutic compounds encompassed within the Licensed Patent Rights for the treatment of thioesterase deficiency disorders"

Upon the expiration or termination of the Start-up Exclusive Evaluation Option License Agreement, Circumvent will have the exclusive right to execute a Start-Up Exclusive Patent License Agreement which will supersede and replace the Start-up Exclusive Evaluation Option License Agreement, with no greater field of use and territory than granted in the Start-up Exclusive Evaluation Option License Agreement.

**DATES:** Only written comments and/or applications for a license which are received by the NIH Office of