

Type of application form	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
General Information Worksheet .....	1,034	1	1,034	2.0	2,068
Planning Grant: General Information Worksheet .....	250	1	250	2.5	625
BPHC Funding Request Summary .....	1,034	1	1,034	2.0	2,068
Documents on File .....	1,034	1	1,034	1.0	1,034
Proposed Staff Profile .....	1,034	1	1,034	2.0	2,068
Income Analysis Form .....	1,034	1	1,034	5.0	5,170
Community Characteristics .....	1,034	1	1,034	1.0	1,034
Health Care Plan (Competing) .....	800	1	1,034	4.0	4,136
Health Care Plan (Non-Competing) .....	1,034	1	1,034	2.0	2,068
Business Plan (Competing) .....	800	1	1,034	4.0	4,136
Business Plan (Non-Competing) .....	1,034	1	1,034	2.0	2,068
Services Provided .....	1,034	1	1,034	1.0	1,034
Sites Listing .....	1,034	1	1,034	1.0	1,034
Other Site Activities .....	700	1	700	0.5	350
Change In Scope (CIS) Site Add Checklist .....	300	1	300	1.0	300
CIS Site Delete Checklist .....	200	1	200	1.0	200
CIS Relocation Checklist .....	200	1	200	1.5	300
CIS Service Add Checklist .....	100	1	200	1.0	200
CIS Service Delete Checklist .....	100	1	100	1.0	100
Board Member Characteristics .....	1,034	1	1,034	1.0	1,034
Request for Waiver of Governance Requirements .....	150	1	150	1.0	150
Health Center Affiliation Certification .....	250	1	250	1.0	250
Need for Assistance .....	900	1	900	3.0	2,700
Emergency Preparedness Form .....	1,034	1	1,034	1.0	1,034
Points of Contact .....	800	1	800	0.5	400
EHR Readiness Checklist .....	250	1	250	1.0	250
Environmental Information and Documentation (EID) .....	400	1	400	2.0	800
Assurances .....	900	1	900	.5	450
Equipment List .....	900	1	900	1.0	900
Other Requirements for Sites .....	900	1	900	.5	450
<b>Total .....</b>	<b>1,034</b>	<b>1</b>	<b>21,876</b>	<b>.....</b>	<b>38,411</b>

E-mail comments to [paperwork@hrsa.gov](mailto:paperwork@hrsa.gov) or mail the HRSA Reports Clearance Officer, Room 10-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: March 22, 2010.

**Sahira Rafiullah,**

*Director, Division of Policy and Information Coordination.*

[FR Doc. 2010-6880 Filed 3-26-10; 8:45 am]

**BILLING CODE 4165-15-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more

information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

Comments are invited on: (a) Whether the proposed collections of information are 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: SAMHSA Application for Peer Grant Reviewers (OMB No. 0930-0255)—Extension

Section 501(h) of the Public Health Service (PHS) Act (42 U.S.C. 290aa) directs the Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA) to establish such peer review groups as are needed to carry out the requirements of Title V of the PHS Act. SAMHSA administers a large discretionary grants

program under authorization of Title V, and, for many years, SAMHSA has funded grants to provide prevention and treatment services related to substance abuse and mental health.

In support of its grant peer review efforts, SAMHSA desires to continue to expand the number and types of reviewers it uses on these grant review committees. To accomplish that end, SAMHSA has determined that it is important to proactively seek the inclusion of new and qualified representatives on its peer review groups. Accordingly SAMHSA has developed an application form for use by individuals who wish to apply to serve as peer reviewers.

The application form has been developed to capture the essential information about the individual applicants. Although consideration was given to requesting a resume from interested individuals, it is essential to have specific information from all applicants about their qualifications. The most consistent method to accomplish this is through completion of a standard form by all interested persons which captures information about knowledge, education, and experience in a consistent manner from all interested applicants. SAMHSA will use the information provided on the

applications to identify appropriate peer grant reviewers. Depending on their experience and qualifications,

applicants may be invited to serve as either grant reviewers or review group chairpersons.

The following table shows the annual response burden estimate.

	Number of respondents	Responses/ respondent	Burden/ responses (hours)	Total burden hours
500 .....		1	1.5	750

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 7-1044, One Choke Cherry Road, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: March 23, 2010.

**Elaine Parry,**

*Director, Office of Program Services.*

[FR Doc. 2010-6870 Filed 3-26-10; 8:45 am]

**BILLING CODE 4162-20-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Proposed Information Collection Activity; Comment Request

##### *Proposed Projects:*

*Title:* ACF Grantee Survey of the Low Income Home Energy Assistance Program (LIHEAP).

*OMB No.:* 0970-0076.

*Description:* The LIHEAP Grantee Survey is an annual data collection activity, which is sent to grantees of the 50 states and the District of Columbia administering the Low Income Home Energy Assistance Program (LIHEAP). The survey is mandatory in order that national estimates of the sources and uses of LIHEAP funds can be calculated

in a timely manner; a range can be calculated of State average LIHEAP benefits; and maximum income cutoffs for four-person households can be obtained for estimating the number of low-income households that are income eligible for LIHEAP under the State income standards. The need for the above information is to provide the Administration and Congress with fiscal estimates in time for hearings about LIHEAP appropriations and program performance. The information also is included in the Departments annual LIHEAP Report to Congress. Survey information also will be posted on the Office of Community Services LIHEAP Web site for access by grantees and other interested parties.

*Respondents:* 50 States and the District of Columbia.

#### ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
LIHEAP Grantee Survey .....	51	1	3.50	178.50

Estimated Total Annual Burden Hours: 178.50.

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, *Attn:* ACF Reports Clearance Officer. *E-mail address:* [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection. The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: March 24, 2010.

**Robert Sargis,**

*Reports Clearance Officer.*

[FR Doc. 2010-6862 Filed 3-26-10; 8:45 am]

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Proposed Information Collection Activity; Comment Request

##### Proposed Projects

*Title:* Strengthening Communities Fund Program Evaluation.

*OMB No.:* New Collection.

*Description:* This proposed information collection activity is to obtain evaluation information from Strengthening Communities Fund (SCF) grantees. Grantees include participants in two SCF grant programs contributing to the economic recovery as authorized in the American Recovery and Reinvestment Act of 2009 (ARRA). The SCF evaluation is an important opportunity to examine the outcomes achieved by the Strengthening Communities Fund in meeting its objective of improving the capacity of