

## ESTIMATED ANNUALIZED BURDEN HOURS

| Type of respondents                   | Form name                                     | Number of respondents | Number of responses per respondent | Average burden per response (in hours) |
|---------------------------------------|---|-----------------------|------------------------------------|--|
| State Education Agency Contacts ..... | State Recruitment Script .....                | 17                    | 1                                  | 30/60                                  |
| School District Contacts .....        | District Recruitment Script .....             | 80                    | 1                                  | 30/60                                  |
| School Administrators .....           | School Recruitment Script .....               | 133                   | 1                                  | 30/60                                  |
| Teachers .....                        | Data Collection Checklist and Make-up Form    | 400                   | 1                                  | 15/60                                  |
| Students .....                        | NYPANS Questionnaire .....                    | 8,000                 | 1                                  | 45/60                                  |
|                                       | Height and Weight Record Form .....           | 8,000                 | 1                                  | 3/60                                   |
|                                       | Student Contact Form .....                    | 1,200                 | 1                                  | 2/60                                   |
|                                       | 24-Hour Dietary Recall Interview Script ..... | 750                   | 3                                  | 30/60                                  |

Dated: June 15, 2009.

**Maryam I. Daneshvar,**

*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*

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**BILLING CODE 4163-18-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Proposed Information Collection Activity; Comment Request

##### Proposed Projects

*Title:* Head Start Eligibility Verification.

*OMB No.:* New Collection.

*Description:* The requirements for establishing proof of eligibility for the

enrollment of children in Head Start programs are documented in 45 CFR 1305.4(e). Each child's record must include a signed document by an employee identifying those documents which were reviewed to determine eligibility. Presently there is no uniform document which the employee must sign. This form will be used to facilitate an efficient and accurate determination of childrens' eligibility for Head Start enrollment.

*Respondents:* Head Start grantees.

#### ANNUAL BURDEN ESTIMATES

| Instrument                                | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|---|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Head Start Eligibility Verification ..... | 1,600                 | 750                                | 0.08                              | 96,000             |

Estimated Total Annual Burden Hours: 96,000.

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: June 16, 2009.

**Janean Chambers,**

*Reports Clearance Officer.*

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**BILLING CODE 4184-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Food and Drug Administration

[Docket No. FDA-2009-N-0262]

#### Clinical Trials Transformation Initiative (U19)

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is announcing the availability of grant funds to support the Clinical Trials Transformation Initiative (CTTI). The goal of CTTI is to support modernization of the clinical trial enterprise by identifying practices that will enhance human subject protection, boost the quality of information derived from clinical trials, and make the research process more efficient.

**DATES:** Important dates are as follows:

1. The application is due by: July 6, 2009.
2. The anticipated start date is in: September 2009.