

for the project, or other enforcement actions such as withholding of payments or converting to the reimbursement method of payment. Continued failure to submit required reports may result in one or both of the following: (1) The imposition of special award provisions; and (2) the non-funding or non-award of other eligible projects or activities. This applies whether the delinquency is attributable to the failure of the grantee organization or the individual responsible for preparation of the reports.

## VII. Agency Contact(s)

1. Questions on the programmatic and technical issues may be directed to: Mary E. Trujillo, Program Specialist. Telephone No.: 301-443-7821. Fax No.: 301-443-1050. E-mail: [metrujil@hqe.ihs.gov](mailto:metrujil@hqe.ihs.gov).

2. Questions on grants management and fiscal matters may be directed to: Patricia Spotted Horse, Grants Management Specialist. Telephone No.: 301-443-5204. Fax No.: 301-443-9602. E-mail: [pspotted@hqe.ihs.gov](mailto:pspotted@hqe.ihs.gov).

## VIII. Other Information

The Public Health Service (PHS) strongly encourages all grant and contract recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Pub. L. 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of the facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

Dated: March 29, 2006.

**Robert G. McSwain,**  
Deputy Director, Indian Health Service.  
[FR Doc. 06-3254 Filed 4-4-06; 8:45 am]  
BILLING CODE 4165-16-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Indian Health Service

#### Tribal Self-Governance Program; Negotiation Cooperative Agreement; Extension of Deadline for New Funding Cycle for Fiscal Year 2006

*Funding Opportunity Number:* HHS-2006-IHS-TSGP-0002.  
*CFDA Number:* 93.210.

**Note:** The purpose of this second announcement is to provide another opportunity for all eligible applicants to

apply for FY 2006 funding under the Self-Governance Negotiation Cooperative Agreement. The previous **Federal Register** notice published on December 14, 2005, FR Doc. E5-7280, provided an initial deadline of January 20, 2006. The application deadline for this announcement is May 19, 2006.

**Key Dates:** Applications Due—May 19, 2006; Objective Review Committee to Evaluate Applications—June 21–22, 2006; Anticipated Project Start Date—August 7, 2006.

## I. Funding Opportunity Description

The purpose of the program is to award cooperative agreements that provide negotiation resources to Tribes interested in participating in the Tribal Self-Governance Program (TSGP) as authorized by Title V, Tribal Self-Governance Amendments of 2000 of the Indian Self-Determination and Education Assistance Act of Public Law (Pub. L.) 93-638, as amended. This grant is authorized under the authority of Section 503(e) of the Indian Self-Determination and Education Assistance Act, 25 U.S.C. 458aaa-2(e). The TSGP is designed to promote self-determination by allowing Tribes to assume more control of Indian Health Service (IHS) programs and services through compacts negotiated with the IHS. The Negotiation Cooperative Agreement provides Tribes with funds to help cover the expenses involved in preparing for and negotiating with the IHS and assists eligible Indian Tribes to prepare for Compacts and Funding Agreements (FAs) with an effective date of October 1, 2006, or January 1, 2007.

The Negotiation Cooperative Agreement provides resources to assist Indian Tribes to conduct negotiation activities that include but are not limited to:

- Analysis of the complex IHS budget to determine what programs, services, functions, and activities (PSFAs) will be negotiated.
- Development of the terms and conditions that will be set forth in a Compact and Funding Agreement (FA).
- Consultant costs such as Attorney or Financial Advisors.
- Communication Costs.
- Identification of Tribal shares that will be included in the FA.

The award of a Negotiation Cooperative Agreement is not required as a prerequisite to enter the TSGP. Indian Tribes that have completed comparable health planning activities in previous years using tribal resources but have not received a Tribal self-governance planning award are also eligible to apply. Applicants must provide a statement that the planning phase has been conducted to the

satisfaction of the Indian Tribe and must include: (a) Legal and budgetary research; and (b) internal Tribal government planning and organizational preparation relating to the administration of health programs.

## II. Award Information

*Type of Award:* Cooperative Agreement.

*Estimated Funds Available:* The total amount identified for Fiscal Year (FY) 2006 is \$240,000 for approximately twelve (12) Tribes to enter the TSGP negotiation process for compacts beginning in Fiscal Year (FY) 2007 or Calendar Year (CY) 2007. Awards under this announcement are subject to the availability of funds.

*Anticipated Number of Awards:* The estimated number of awards to be funded is approximately 12.

*Project Period:* 12 months.

*Award Amount:* \$20,000 per year.

*Programmatic Involvement:* IHS TSGP funds will be awarded as cooperative agreements and will have substantial programmatic involvement to establish a process through which Tribes can effectively approach the IHS to identify programs and associated funding which could be incorporated into programs.

The IHS roles and responsibilities will include:

- Identification of IHS staff that will consult with applicants on methods used by the IHS to manage and deliver health care.

- Provide applicants with a list of laws and regulations that provide authority for the various IHS programs.

The Grantee roles and responsibilities will include:

- Research and analysis of the complex IHS budget, at the Service Unit, Area, and Headquarters levels.

- Establishment of a basic understanding of IHS PSFAs operations at the Service Unit, Area, and Headquarters levels.

## III. Eligibility Information

### 1. Eligible Applicants

To be eligible for a negotiation cooperative agreement under this announcement, an applicant must meet all of the following criteria:

A. Be a Federally-recognized Tribe as defined in Title V, Pub. L. 106-260, Tribal Self-Governance Amendments of 2000, of the Indian Self-Determination and Education Assistance Act (the Act), Pub. L. 93-638, as amended. However, Alaska Native Villages or Alaska Native Village Corporations, who are located within the area served by an Alaska Native regional health entity already participating in compact status, are not

eligible (Pub. L. 106–260, Title V, Section 12(a)(2)). Those Tribes not represented by a self-governance Tribal consortium compact that have previously received negotiation funds may still be considered to participate in the TSGP, subject to the provisions in this announcement, however, with the following exception cited in Section 351, Pub. L. 105–277, the FY 1999 Omnibus Appropriations Bill: “Notwithstanding any other provision of law, prior to September 1, 2001, the IHS may not disburse funds for the provision of health care services pursuant to Pub. L. 93–638 (25 U.S.C. 450, *et seq.*) with any Alaska Native Village or Alaska Native Village Corporation that is located within the area served by an Alaska Native regional health entity.”

## 2. Cost Sharing or Matching Funds

The Self-Governance Negotiation Cooperative Agreement Announcement does not require matching funds or cost sharing to participate in the competitive grant process.

## 3. Other Requirements

The following documentation is required (if applicable):

A. This program is described at 93.210 in the *Catalog of Federal Domestic Assistance*. There is limited competition under this announcement because the authorizing legislation restricts eligibility to Tribes that meet specific criteria. (Refer to Section III, ELIGIBLE APPLICANTS in this announcement.)

B. Request participation in self-governance by resolution by the governing body of the Indian Tribe. An Indian Tribe that is proposing a cooperative agreement affecting another Indian Tribe must include resolutions from all affected Tribes to be served.

C. Demonstrate, for three FY's, financial stability and financial management capability, which is defined as no uncorrected significant and material audit exceptions in the required annual audit of the Indian Tribe's self-determination contracts or self-governance funding agreements with any Federal agency.

D. Grantees are required to submit a current version of the organization's audit report. Audit reports can be lengthy; therefore, the applicants may submit them separately via regular mail by the due date (May 19, 2006). If the grantee determines that the audit reports are not lengthy, the applicants may scan the documents and attach them to the electronic application. Applicants must submit two copies of the audits that reflect three previous fiscal years under

separate cover directly to the Division of Grants Operations, 801 Thompson Avenue, TMP 360, Rockville, MD 20852, referencing the Funding Opportunity Number, HHS–2006–IHS–TSGP–0002, as prescribed by Pub. L. 98–502, the Single Audit Act, as amended (see OMB Circular A–133, revised June 24, 1997, Audits of States, Local Governments, and Non-Profit Organizations). If this documentation is not submitted by the due date, the application will be considered as unresponsive and will not be considered. Applicants must include the grant tracking number assigned to their electronic submission by Grants.gov and the date submitted via Grants.gov in their cover letter transmitting the required audits for the previous three fiscal years.

E. Tribal Resolution—A resolution of the Indian Tribe served by the project must accompany the application submission. For Tribal Consortia applying for a Negotiation Cooperative Agreement, individual Tribal Council Resolutions from all individual Tribes whose PSFAs will be compacted must be submitted.

Draft resolutions are acceptable in lieu of an official resolution during the review process. However, an official signed Tribal resolution must be received by the Division of Grants Operations (DGO) by the end of the Objective Review (June 22, 2006). If an official signed resolution is not submitted by June 22, 2006, the application will be considered incomplete and will be returned as unresponsive.

\*It is highly recommended that the Tribal resolution be sent by Federal Express for proof of receipt.

## IV. Application and Submission Information

### 1. Application Package May Be Found on Grants.gov

Information regarding the electronic application process may be obtained from either of the following persons:

Ms. Mary E. Trujillo, Office of Tribal Self-Governance, Indian Health Service, 801 Thompson Avenue, Suite 240, Rockville, Maryland 20852. (301) 443–7821.

Ms. Patricia Spotted Horse, Division of Grants Operations, Indian Health Service, 801 Thompson Avenue, TMP 360, Rockville, Maryland 20852. (301) 443–5204.

• Web address to obtain application kit: [http://www.ihs.gov/NonMedicalPrograms/gogp/gogp\\_submission.asp](http://www.ihs.gov/NonMedicalPrograms/gogp/gogp_submission.asp)

## 2. Content and Form of Application Submission

A. All applications should:

- Be single spaced.
- Be typewritten.
- Have consecutively numbered pages.
- Use black type not smaller than 12 characters per one inch.
- Be printed on one side only of standard size 8½" x 11" paper.
- Contain a narrative that does not exceed 7 typed pages that includes the sections listed below. (The 7 page narrative does not include the work plan, standard forms, Tribal resolution(s), table of contents, budget, budget justifications, narratives, and/or other appendix items.)

*Public Policy Requirements:* All Federal-wide public policies apply to IHS grants with exception of Lobbying and Discrimination.

## 3. Submission Dates and Times

Applications must be submitted online by May 19, 2006. Late applications not accepted for processing will be returned to the applicant and will not be accepted. When submitting a paper application, a signed original and one copy must be postmarked no later than May 19, 2006. Incomplete, unsigned copies of the paper application will be returned and will not be accepted. (See page 12, “Please note the following.”)

## 4. Intergovernmental Review

This funding opportunity is not subject to Executive Order 12372, “Intergovernmental Review of Federal Programs.” State approval is not required.

## 5. Funding Restrictions

A. Only one negotiation cooperative agreement will be awarded per applicant.

B. Each negotiation cooperative agreement shall not exceed \$20,000. The available funds are inclusive of direct and indirect costs.

C. Negotiation awards shall not exceed a maximum period of one year.

D. Pre-award costs are not allowable.

## 6. Other Submission Requirements

The application must comply with the following:

A. Abstract (one page)—Summarizes the project.

B. Application for Federal Assistance (SF–424, Rev. 09/03).

C. Narrative (no more than 7 pages) with time frame chart (one page); pages numbered consecutively, including appendices, and Table of Contents, and should include the following:

(1) Background information on the Tribe.

(2) Objectives and activities that provide a description of what will be accomplished.

(3) A line-item budget and narrative justification.

(4) Appendix to include:

a. Resumes or position descriptions of key staff.

b. Contractors/Consultants resumes or qualifications.

c. Proposed Scope of Work.

d. Provide a statement that the planning phase has been conducted to the satisfaction of the Indian Tribe and must include: (a) Legal and budgetary research; and (b) internal Tribal government planning and organizational preparation relating to the administration of health programs.

#### Electronic Transmission

The preferred method for receipt of applications is electronic submission through Grants.gov. However, should any technical problems arise regarding the submission, please contact our Grants Policy Staff at (301) 443-6528 at least ten days prior to the application deadline. To submit an application electronically, please use the <http://www.Grants.gov> apply site. Download a copy of the application package, on the Grants.gov Web site, complete it offline and then upload and submit the application via the Grants.gov site. You may not e-mail an electronic copy of a grant application to us.

Please note the following:

- Under the new IHS requirements, paper applications are not the preferred method. However, if you have technical problems submitting your application online, and you have contacted the Grants Policy Staff and advised them of the difficulties you are having submitting your application online, you may submit a paper application after you have downloaded the application package from Grants.gov, and send it directly to the Division of Grants Operations, 801 Thompson Avenue, TMP 360, Rockville, MD 20852, by the due date, May 19, 2006.

- When you enter the Grants.gov site, you will find information about submitting an application electronically through the site, as well as the hours of operation. We strongly recommend that you do not wait until the deadline date to begin the application process through Grants.gov.

- To use Grants.gov, you, as the applicant, must have a DUNS Number and register in the Central Contractor Registry (CCR). You should allow a minimum of 10-15 days to complete

CCR registration. See below on how to apply.

- You must submit all documents electronically, including all information typically included on the SF-424 and all necessary assurances and certifications.

- Your application must comply with any page limitation requirements described in the program announcement.

- After you electronically submit your application, you will receive an automatic acknowledgment from Grants.gov that contains a Grants.gov tracking number. The Indian Health Service will retrieve your application from Grants.gov.

- You may access the electronic application for this program on <http://www.Grants.gov>.

- You must search for the downloadable application package by CFDA number.

- To receive an application package, the applicant must provide the Funding Opportunity Number: HHS-2006-IHS-TSGP-0002.

E-mail applications will not be accepted under this announcement.

#### Duns Number

Beginning October 1, 2003, applicants were required to have a Dun and Bradstreet (DUNS) number to apply for a grant or cooperative agreement from the Federal Government. The DUNS number is a nine-digit identification number, which uniquely identifies business entities. Obtaining a DUNS number is easy and there is no charge. To obtain a DUNS number, access <http://www.dunandbradstreet.com> or call 1-866-705-5711. Interested parties may wish to obtain their DUNS number by phone to expedite the process.

Applications submitted electronically must also be registered with the Central Contractor Registry (CCR). A DUNS number is required before CCR registration can be completed. Many organizations may already have a DUNS number. Please use the number listed above to investigate whether or not your organization has a DUNS number. Registration with the CCR is free of charge.

Applicants may register by calling 1-888-227-2423. Please review and complete the CCR "Registration Worksheet" located in the appendix of the TSGP Negotiation Cooperative Agreement application kit or on <http://www.grants.gov/CCRRegister>.

More detailed information regarding these registration processes can be found at <http://www.grants.gov>.

## V. Application Review Information

The instructions for preparing the application narrative also constitute the evaluation criteria for reviewing and scoring the application. Weights assigned to each section are noted in parentheses.

### 1. Criteria

#### Demonstration of Previous Planning Activities (30 Points)

Thoroughness and appropriateness of planning activity to proposed scope of compact is demonstrated, i.e., has the Indian Tribe determined the PSFAs to be assumed? Has the Indian Tribe determined it has the administrative infrastructure to support the assumption of the PSFAs? Are the results of what was learned or is being learned during the planning process clearly stated?

#### Thoroughness of Approach (25 Points)

Is a specific narrative provided of the direction the Indian Tribe plans to take in the TSGP? How will the Tribe demonstrate improved health and services? Is the Indian Tribe ready to negotiate a compact to begin October 1, 2006 or January 1, 2007? Are proposed time lines for negotiations indicated?

#### Project Outcome (25 Points)

What beneficial contributions are expected or anticipated to the TSGP projected? Is information provided on the services that will be assumed? How will any improvements be made to managing the health program under the TSGP to better serve its Tribal members? Are Tribal needs discussed in relation to programmatic alternatives and outcomes?

#### Administrative Capabilities (20 Points)

Does the Indian Tribe clearly demonstrate knowledge and experience in the operation and management of other health programs? Is the internal management and administrative infrastructure of the applicant described and its relationship to the successful implementation of self-governance operation of health programs explained?

#### Appendix Items

- Work plan for proposed objectives.
- Position descriptions for key staff.
- Resumes of key staff that reflect current duties.
- Consultant proposed scope of work (if applicable).
- Indirect Cost Agreement.
- Organizational chart (optional).
- Audits

## 2. Review and Selection Process

In addition to the above criteria/requirements, applications are considered according to the following:

A. Application Submission (Application Deadline: May 19, 2006). Applications submitted in advance of or by the deadline and verified by the tracking number will undergo a preliminary review to determine that:

- The applicant and proposed project type is eligible in accordance with this grant announcement.
- The application is not a duplication of a previously funded project.
- The application narrative, forms, and materials submitted meet the requirements of the announcement allowing the review panel to undertake an in-depth evaluation; otherwise, it may be returned.

B. Competitive Review of Eligible Applications (Objective Review: June 21–22, 2006).

Applications meeting eligibility requirements that are complete, responsive, and conform to this program announcement will be reviewed for merit by the Objective Review Committee (ORC) appointed by the IHS to review and make recommendations on these applications. The review will be conducted in accordance with the IHS Objective Review Guidelines. The technical review process ensures selection of quality projects in a national competition for limited funding. Applications will be evaluated and rated on the basis of the evaluation criteria listed in Section V.1.

The criteria are used to evaluate the quality of a proposed project, determine the likelihood of success, and assign a numerical score to each application. The scoring of approved applications will assist the IHS in determining which proposals will be funded if the amount of TSGP funding is not sufficient to support all approved applications. Applications recommended for approval, having a score of 60 or above by the ORC and scored high enough to be considered for funding, are forwarded by the Division of Grants Operations (DGO) for cost analysis and further recommendation. The program official forwards the approval list to the IHS Director for final review and approval. Applications scoring below 60 points will be disapproved and returned to the applicant.

**Note:** In making final selections, the IHS Director will consider the ranking factor and the status of the applicant's single audit reports. The comments from the ORC will be advisory only. The IHS Director will make the final decision on awards.

## VI. Award Administration Information

### 1. Award Notices

The Division of Grants Operations (DGO) will not award a grant without an approved application in conformance with regulatory and policy requirements which describes the purpose and scope of the project to be funded. When the application is approved for funding, the DGO will prepare a Notice of Award (NoA), signed by the Grants Management Official, which is the authorizing document, with special terms and conditions binding upon the award and refer to all general terms applicable to the award. The NoA will serve as the official notification of grant award which will be sent to the applicant via postal mail, and will state the amount of Federal funds awarded, the purpose of the grant, the terms and conditions of the grant award, the effective date of the award, the project period, and the budget period. Any other correspondence announcing to the Project Director that an application was selected is not an authorization to begin performance.

### 2. Administrative and National Policy Requirements

Grants are administered in accordance with the following documents:

- This grant announcement.
- Health and Human Services regulations governing Pub. L. 93–638 grants at 42 CFR 36.101 *et seq.*
- 45 CFR Part 92, “Department of Health and Human Services, Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments Including Indian Tribes.”
- Public Health Service Grants Policy Statement.
- Appropriate Cost Principles: OMB Circular A–87, “State and Local Governments.”
- OMB Circular A–133, “Audits of States, Local Governments, and Non-Profit Organizations.”
- Other Applicable OMB Circulars.
- For information regarding the above circulars, log on to: <http://www.whitehouse.gov/omb/circulars/>

### 3. Reporting

A. *Progress Report.* Program progress reports are required semi-annually. These reports should be mailed to the Program Official listed on page 9 and should include a brief comparison of actual accomplishments to the goals established for the period, reasons for slippage (if applicable), and other pertinent information as required. A final report must be submitted within 90

days of expiration of the budget/project period.

B. *Financial Status Report.* Semi-annual financial status reports must be submitted within 30 days of the end of the half year. Final financial status reports are due within 90 days of expiration of the budget/project period. Standard Form 269 (long form) will be used for financial reporting.

Grantees are responsible and accountable for accurate reporting of the Progress Reports and Financial Status Reports which are generally due semi-annually. Financial Status Reports (SF–269) are due 90 days after each budget period and the final SF–269 must be verified from the grantee records on how the value was derived. Grantees are allowed a reasonable period of time in which to submit financial and performance reports.

Failure to submit required reports within the time allowed may result in suspension or termination of an active grant, withholding of additional awards for the project, or other enforcement actions such as withholding of payments or converting to the reimbursement method of payment. Continued failure to submit required reports may result in one or both of the following: (1) The imposition of special award provisions; and (2) the non-funding or non-award of other eligible projects or activities. This applies whether the delinquency is attributable to the failure of the grantee organization or the individual responsible for preparation of the reports.

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2. Questions on grants management and fiscal matters may be directed to: Patricia Spotted Horse, Grants Management Specialist. Telephone No.: 301–443–5204. Fax No.: 301–443–9602. E-mail: [pspotted@hqe.ihs.gov](mailto:pspotted@hqe.ihs.gov).

## VIII. Other Information

The Public Health Service (PHS) strongly encourages all grant and contract recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Pub. L. 103–227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of the facility) in which regular or routine education, library, day care, health care or early childhood development services are provided to children. This is consistent with the

PHS mission to protect and advance the physical and mental health of the American people.

Dated: March 29, 2006.

**Robert G. McSwain,**

*Deputy Director, Indian Health Service.*

[FR Doc. 06-3255 Filed 4-4-06; 8:45 am]

BILLING CODE 4165-16-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Environmental Health Sciences; Division of Extramural Research and Training; Proposed Collection; Comment Request; Hazardous Waste Worker Training

**SUMMARY:** In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Institute of Environmental Health Sciences (NIEHS), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

#### Proposed Collection

*Title:* Hazardous Waste Worker Training—42 CFR part 65.

*Type of Information Collection Request:* Revision of OMB No. 0925-0348 and expiration date February 28, 2005.

*Need and Use of Information Collection:* This request for OMB review and approval of the information collection is required by regulation 42 CFR part 65(a)(6). The National Institute of Environmental Health Sciences (NIEHS) was given major responsibility for initiating a worker safety and health training program under section 126 of the Superfund Amendments and Reauthorization Act of 1986 (SARA) for hazardous waste workers and emergency responders. A network of non-profit organizations that are committed to protecting workers and their communities by delivering high-quality, peer-reviewed safety and health curricula to target populations of hazardous waste workers and emergency responders has been developed. In seventeen years (FY 1987-2004), the NIEHS Worker Training program has successfully supported 20 primary grantees that have trained more than 1.2 million workers across the country and presented over 68,000 classroom and hands-on training courses, which have accounted for

nearly 18 million contact hours of actual training. Generally, the grant will initially be for one year, and subsequent continuation awards are also for one year at a time. Grantees must submit a separate application to have the support continued for each subsequent year. Grantees are to provide information in accordance with S65.4(a), (b), (c) and 65.6(a) on the nature, duration, and purpose of the training, selection criteria for trainees' qualifications and competency of the project director and staff, cooperative agreements in the case of joint applications, the adequacy of training plans and resources including budget and curriculum, and response to meeting training criteria in OSHA's Hazardous Waste Operations and Emergency Response Regulations (29 CFR 1910.120). As a cooperative agreement, there are additional requirements for the progress report section of the application. Grantees are to provide their information in hard copy as well as enter information into the WETP Grantee Data Management System. The information collected is used by the Director through officers, employees, experts, and consultants to evaluate applications based on technical merit to determine whether to make awards.

*Frequency of Response:* Biannual.

*Affected Public:* Non-profit organizations.

*Type of Respondents:* Grantees.

The annual reporting burden is as follows:

*Estimated Number of Respondents:* 18.

*Estimated Number of Responses per Respondent:* 2;

*Average Burden Hours per Response:* 10; and

*Estimated Total Annual Burden Hours Requested:* 360.

The annualized cost to respondents is estimated at: \$10,764. There are no Capital Costs, Operating costs and/or Maintenance Costs to report.

*Request for Comments:* Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond, including the use

of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

**FOR FURTHER INFORMATION CONTACT:** To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Joseph T. Hughes, Jr., Director, Worker Education and Training Branch, Division of Extramural Research and Training, NIEHS, P.O. Box 12233, Research Triangle Park, NC 27709 or call non-toll-free number (919) 541-0217 or E-mail your request, including your address to [wetp@niehs.nih.gov](mailto:wetp@niehs.nih.gov).

*Comments Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 60 days of the date of this publication.

Dated: March 27, 2006.

**Richard A. Freed,**

*NIEHS, Associate Director for Management.*

[FR Doc. 06-3217 Filed 4-4-06; 8:45 am]

BILLING CODE 4140-01-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### Government-Owned Inventions; Availability for Licensing

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

**ACTION:** Notice.

**SUMMARY:** The inventions listed below are owned by an agency 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.

#### Live Tissue Imaging Gel

Emily Rothstein (NHLBI).