primary Federal agency for protecting health and promoting quality of life through the prevention and control of disease, injury, and disability. The CDC Workplace Health Promotion Resource Center is authorized by the Public Health Service Act and funded through the Prevention and Public Health Fund of the Patient Protection and Affordable Care Act (ACA).

Resource Center development and information collection will be conducted in two phases over a three-year period. In Phase 1 (project years 1 and 2), CDC will conduct formative research to understand the needs and preferences of the target audience. In Phase 2 (project years 2 and 3), CDC will build the Resource Center and IC, provide technical assistance, and assess customer satisfaction.

During Phase 1, CDC will conduct telephone interviews with 50 individuals who represent key Resource Center audiences: Employers (N=10), business groups (N=10), vendors and consultants (N=12), public health organizations (N=4), journalists (N=4), and researchers (N=10). Each tailored interview will be 45–60 minutes in length. Additional information will be collected through an online Needs and Interests Market Survey involving 800 respondents. Findings will be used to tailor the contents, technical support and dissemination practices of the Resource Center to the needs and interests of the target audiences.

During Phase 2, Resource Center products will be launched and CDC will collect brief, online customer satisfaction surveys from approximately 850 users. CDC will also pilot test and evaluate a direct technical assistance component of the Resource Center with approximately 5 selected states using two online surveys: a TA feedback survey and TA pilot assessment. The TA feedback survey will be offered to up to 100 stakeholders after each TA encounter and will take approximately 5 minutes. The TA pilot assessment will be provided at the conclusion of the TA pilot to up to 100 stakeholders and will take approximately 20 minutes. Findings will be used to improve workplace health programs and the offerings of the Resource Center.

OMB approval is requested for three years. Participation is voluntary and there are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden (in hrs.)
Employers	Needs and Interests Interview Guide for Employers.	3	1	1	3
Business Groups, Vendors, Consultants, and Public Health Organizations.	Needs and Interests Interview Guide for Business Groups, Vendors, Consultants, and Public Health Organizations.	9	1	1	9
Journalists	Needs and Interests Interview Guide for Journalists.	1	1	45/60	1
Researchers	Needs and Interests Interview Guide for the Research Community.	3	1	45/60	2
Key Stakeholders and Users of the Resource Center (All Groups).	Stakeholder Needs and Interests Market Survey.	267	1	20/60	89
	Consumer Satisfaction Survey	283	1	2/60	9
Technical Assistance (TA) Participants	TA Feedback Survey	33	5	5/60	14
	TA Pilot Assessment	33	1	20/60	11
Total					138

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. 2016–09638 Filed 4–25–16; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-16–0199; Docket No. CDC–2016–0039]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), 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 proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on an extension request for the information collection entitled *Application for Permit to Import Biological Agents and Vectors of Human Disease into the United States* and *Application for Permit to Import or Transport Live Bats (42 CFR 71.54).*

DATES: Written comments must be received on or before June 27, 2016.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2016–0039 by any of the following methods:

- *Federal eRulemaking Portal:* Regulation.gov. Follow the instructions for submitting comments.
- Mail: Leroy A. Richardson, 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.

Please 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

Application for Permit to Import Biological Agents and Vectors of Human Disease into the United States and Application for Permit to Import or Transport Live Bats (42 CFR 71.54) (OMB Control No. 0920–0199, exp. 01/31/2017)—Extension—Office of Public Health Preparedness and Response (OPHPR), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 361 of the Public Health Service Act (42 U.S.C. 264), as amended, authorizes the Secretary of Health and Human Services to make and enforce such regulations as are necessary to prevent the introduction, transmission, or spread of communicable diseases from foreign countries into the States or possessions, or from one State or possession into any other State or possession. Part 71 of Title 42, Code of Federal Regulations (Foreign Quarantine) sets forth provisions to prevent the introduction, transmission, and spread of communicable disease from foreign countries into the United States. Subpart F—Importations—contains provisions for the importation of infectious biological agents, infectious substances, and vectors (42 CFR 71.54); requiring persons that import these materials to obtain a permit issued by the CDC.

CDC requests Office of Management and Budget approval to collect information for three years using the Application for Permit to Import Infectious Biological Agents into the United States and the Application for a Permit to Import or Transport Live Bats.

The Application for Permit to Import Biological Agents, Infectious Substances and Vectors of Human Disease into the United States form is used by laboratory facilities, such as those operated by government agencies, universities, and research institutions to request a permit for the importation of biological agents, infectious substances, or vectors of human disease. This form currently requests applicant and sender contact information; description of material for importation; facility isolation and containment information; and personnel qualifications. CDC plans to make no changes to this application.

The Application for Permit to Import or Transport Live Bats form is used by laboratory facilities such as those operated by government agencies, universities, research institutions, and for educational, exhibition, or scientific purposes to request a permit for the importation, and any subsequent distribution after importation, of live bats. This form currently requests the applicant and sender contact information; a description and intended use of bats to be imported; and facility isolation and containment information. CDC plans to make no changes to this application.

Estimates of burden for the survey are based on information obtained from the CDC import permit database on the number of permits issued on annual basis since 2010. The total estimated burden for the one-time data collection is 545 hours.

There are no costs to respondents except their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number responses per respondent	Average burden per response (in hours)	Total burden hours
Applicants Requesting to Import Biological Agents, Infectious Substances and Vectors.	Application for Permit to Import Biological Agents, Infectious Substances and Vectors of Human Disease into the United States.	1,625	1	20/60	542
Applicants Requesting to Import Live Bats.	Application for a Permit to Import Live Bats.	10	1	20/60	3
Total					545

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. 2016–09657 Filed 4–25–16; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Child Care Development Fund Plan for Tribes for FFY 2017–2019 (ACF–118–A).

OMB No.: 0970–0198.

Description: The Child Care and Development Fund (CCDF) Plan (the Plan) for Tribes is required from each CCDF Lead Agency in accordance with Section 658E of the Child Care and Development Block Grant (CCDBG) Act, as amended, by Public Law 113–186 and U.S.C. 9858. The Plan provides ACF and the public with a description of, and assurances about, the Tribes' child care program.

The FY 2017–2019 CCDF Plan Preprint for Tribal grantees is being published in the **Federal Register** for a 30-day Public Comment Period to provide an opportunity for the public to submit comments to the Office of Management and Budget (OMB). The first 60-day comment period on the Tribal Preprint closed on March 19, 2016. The Office of Child Care (OCC) has given thoughtful consideration to those comments received during the 60-day Public Comment Period. The Plan has been revised to provide additional guidance and clarification throughout the document to improve the quality of the information requested. Additional revisions were also made to identify those questions related to the CCDBG Act of 2014 that were added for ''informational purposes only''. A red delta sign has been inserted to specifically identify those questions related to the new law. The CCDBG Act of 2014, signed into law in November of 2014 made significant changes to the CCDF program. However, the law did not explicitly indicate the extent to which many of the new requirements apply to Tribes. Questions related to the CCDBG Act of 2014 will provide ACF with baseline information on Tribal practices and technical assistance needs.

ACF extended the current Tribal Plan for one year, which means that Tribes will submit new 3-year Plans for FY 2017–2019 on July 1, 2016, with an effective date of October 1, 2016. This additional time allowed the Office of Child Care to consult with Tribal Leaders and their designated representatives to solicit input on how the new requirements of the CCDBG Act of 2014 might apply to Tribal child care programs. HHS will publish a Final Rule to determine the extent to which the new law applies to Tribes. Pending the issuance of new regulations and guidance, Tribes are subject to the prior law and regulations.

Respondents: Tribal CCDF Lead Agencies (257).

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF–118–A	257	0.50	120	15,420

Estimated Total Annual Burden Hours: 15,420.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street SW., Washington, DC 20201. Attention Reports Clearance Officer. All requests should be identified by the title of the information collection. *Email address: infocollection@acf.hhs.gov.*

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, *Email: OIRA_SUBMISSION@OMB.EOP.GOV, Attn:* Desk Officer for the Administration for Children and Families.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2016–09618 Filed 4–25–16; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: State Access and Visitation Grant Application.

OMB No.: 0970—NEW.

Description

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) created the ''Grants to States for Access and Visitation'' program (AV grant program). Funding for the program began in FY 1997 with a capped, annual entitlement of $10 million. The statutory goal of the program is to provide funds to states that will enable them to provide services for the purpose of increasing noncustodial parent (NCP) access to and visitation with their children. State governors decide which state entity will be responsible for implementing the AV grant program and the state determines who will be served, what services will be provided, and whether the services will be statewide or in local jurisdictions. The statute specifies certain activities which may be funded, including: voluntary and mandatory mediation, counseling, education, the development of parenting plans, supervised visitation, and the development of guidelines for visitation and alternative custody arrangements. Even though OCSE manages this program, the funding for the AV grant is separate from funding for federal and state administration of the Child Support program.

Section 469B(e)(3) of the Social Security Act (Pub. L. 104–193) requires that each state receiving an Access and Visitation (AV) grant award monitor, evaluate and report on such programs in accordance with regulations (45 CFR part 303). The AV Grant Program Terms