programs have been approved by the Office of Management and Budget under the Paperwork Reduction Act. The OMB Clearance Number is 0915–0060.

Deadline Date

The deadline date for receipt of applications for each of these programs is March 15, 1996. Applications will be

considered to be "on time" if they are either:

- (1) *Received on or before* the established deadline date, or
- (2) Sent on or before the established deadline date and received in time for orderly processing. (Applicants should request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier

or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

Late applications not accepted for processing will be returned to the applicant. In addition, applications which exceed the page limitation and/or do not follow format instructions will not be accepted for processing and will be returned to the applicant.

TABLE 1

PHS section #, title, CFDA #, regulation	Type of assistance	Period of support	Deadline date
746(a)(1), Basic/Core AHEC, 93.824, 42 CFR part 57 subpart MM			3/15/96 3/15/96 3/15/96

These programs are not subject to the provisions of Executive Order 12372, Intergovernmental Review of Federal Programs (as implemented through 45 CFR part 100) or the Public Health System Reporting Requirements.

Dated: January 11, 1996.

Ciro V. Sumaya, Administrator.

[FR Doc. 96-641 Filed 1-19-96; 8:45 am]

BILLING CODE 4160-15-P

Funding Notice for Grant Programs Funded Under Title VII of the Public Health Service Act for Fiscal Year 1996; Notice of Extension of Application Due Date

This notice extends the application due date for fiscal year (FY) 1996 for three grant programs:

Grants for Centers of Excellence (COE) in Minority Health Professions Education (section 739, PHS Act)

Grants for Health Careers Opportunity Program (HCOP) (section 740, PHS Act)

Grants for the Minority Faculty Fellowship Program (MFFP) (section 738(b), PHS Act)

The application due date is extended to February 23, 1996 for the three programs. All applications must be received in the Parklawn Building by close of business on February 23, 1996. This change is necessary because of difficulties experienced with electronically accessing the program materials and the unavailability of technical assistance during the period of government shutdown. All other aspects of the December 4, 1995 Federal Register Notice (60 FR 62098) remain the same.

Dated: January 16, 1996. Ciro V. Sumaya, Administrator. [FR Doc. 96–643 Filed 1–19–96; 8:45 am] BILLING CODE 4160–15–M

Statement of Organization, Functions and Delegations of Authority

Part HB (Health Resources and Services Administration) of the Statement of Organization, Functions and Delegations of Authority of the Department of Health and Human Services (47 FR 38409–24, August 31, 1982, as amended most recently at changes 60 FR 58370, Nov. 27, 1995). The changes are to establish an Office of Field Coordination within the Office of Operations and Management (HBA4); and to establish HRSA Field Offices. The changes are as follows:

I. Under Part HB, Health Resources and Services Administration. Section HB–20, Functions, "Office of Operations and Management (HBA4)" do the following:

A. Delete the "Office of Operations and Management (HBA4)" in its entirety and replace the following:

Office of Operations and Management (HBA4)—Under the direction of the Associate Administrator who is a member of the Administrator's immediate staff: (1) Provides Agencywide leadership, program direction, and coordination to all phases of management; (2) provides management expertise and staff advice and support to the Administrator in program and policy formulation and execution; (3) plans, directs, and coordinates the Agency's activities in the areas of administrative management, financial management, personnel management, debt management, manpower management, grants and contracts

management, procurement, real and personal property accountability and management, and administrative services; (4) coordinates the implementation of the Freedom of Information Act for the Agency; (5) oversees the development of annual operating objectives and coordinates HRSA work planning and appraisals; (6) directs the Equal Employ Opportunity activities for the Office of the Administrator; and (7) oversees the HRSA field activities.

B. Establish the Office of Field Coordination (HBA45), by inserting the following statement before the Division of Grants and Procurement Management (HBA46):

Office of Field Coordination (HBA45)—The Office of Field Coordination serves as the Agency's focal point for Field programs and activities. Specifically: $(\bar{1})$ Oversees and manages HRSA activities in the field; (2) advises the Administrator on appropriate resource allocation for field activities; (3) at the direction of the Administrator, assists in the implementation and evaluation of HRSA programs in the field through coordination of activities, and assessing the effectiveness of programs to identify opportunities for improving policies and service delivery systems; (4) develops and implements activities in the field designed to improve customer service and relationships; (5) at the direction of the Administrator, develops and coordinates the field implementation of special program initiatives which involve multiple HRSA field components and/or multiple HRSA programs; (6) serves as field liaison to the Administrator, Bureau Directors, State and local health officials as well as private and professional organizations; (7) acts as liaison to provide administrative and financial

support services to HRSA field components; (8) provides technical assistance to the Agency's Field Council; and (9) exercises line management authority as delegated from the Administrator for the Field Coordinators related to general administrative and management functions. The facilities and construction engineering activities will operate in the Bureau of Health Resources and Development.

II. Under Part HB, Health Resources and Services Administration, establish a new chapter "HRSA Field Offices (HBD)," to read as follows:

Section HBD-00 Mission—The HRSA Field Offices. The HRSA Field Offices support the Department's mission of improving the health of the Nation's population by administering HRSA filed health programs and activities to assure a coordinated field effort in support of national health policies and State and local needs within each region including: Assessing regional health requirements, assuring integration of HRSA health programs, and addressing cross-cutting program issues and initiatives to achieve program goals; providing a HRSA focal point for responding to the needs of State and local governments, community agencies, and others involved in the planning or provision of general health; supporting intergovernmental activities and responding to health issues of State and local concerns; administering health activities and programs to provide for prevention of health problems, and assuring access to and quality of general health services.

Section HBD-10. Organization. The Health Resources and Services Administration Field Offices consist of:

HRSA Field Offices (HBD1-HBDX). Section HBD-20. Functions. The Field Coordinator, located in the Field Office and reports to the Director, Office of Field Coordination, and serves as the field representative of the Administrator, HRSA. The Field Coordinator carries out the following responsibilities. Specifically: (1) serves as HRSA's senior public health official in the field, providing liaison with State and local health officials as well as private and professional organizations; (2) provides input from regional, State and local perspectives to assist the Administrator and/or Bureau Director in the formulation, development, analysis and evaluation of HRSA programs and initiatives; (3) at the direction of the Administrator and/or in conjunction with the Bureau Directors and the Director, Office of Field Coordination, coordinates the field implementation of special initiatives which involve

multiple HRSA programs and/or field offices (e.g. Border Health); (4) assists with the implementation of HRSA programs in the field by supporting the coordination of activities, alerting program officials of potential issues, and assessing policies and service delivery systems; (5) represents the Administrator in working with the other Federal agencies in coordinating health programs and activities; and (6) exercises line management authority as delegated from the Administrator for general administrative and management functions within the field structure, exclusive of specific direction for statutory program authorities.

Section HBD-30 Delegations of Authority. All delegations and redelegations of authority which were in effect immediately prior to the effective date hereof, have been continued in effect in them or their successors pending further redelegation.

This reorganization is effective upon date of signature.

Dated: January 5, 1996. Ciro V. Sumaya, *Administrator*. [FR Doc. 96–692 Filed 1–19–96; 8:45 am] BILLING CODE 4160–15–M

National Institutes of Health

Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting:

Name of Committee: NCRR Initial Review Group—General Clinical Research Centers Review Committee.

Dates of Meeting: February 7–9, 1996. Time: 8:00 a.m.—until adjournment. Place of Meeting: Holiday Inn, Chevy Chase, 5520 Wisconsin Avenue, Chevy Chase, MD 20815.

Scientific Review Administration: Dr. Richard L. Nahin, National Institutes of Health, 1 Rockledge Center, Room 6116, 6705 Rockledge Drive, MSC 7965, Bethesda, MD 20892–7965, Telephone: (301) 435–0809.

Purpose Agenda: To review and evaluate grant applications. The meeting will be closed in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy. (Catalog of Federal Domestic Assistance Program No. 93.333 Clinical Research, National Institutes of Health, HHS)

Dated: December 18, 1995. Susan K. Feldman, Committee Management Officer, NIH. [FR Doc. 96–680 Filed 1–19–96; 8:45 am] BILLING CODE 4140–01–M

National Heart, Lung, and Blood Institute; Notice of Meeting of the National Heart, Lung, and Blood Advisory Council

Pursuant to Public Law 92–463, notice is hereby given of the meeting of the National Heart, Lung, and Blood Advisory Council, National Heart, Lung, and Blood Institute, February 15–16, 1996, National Institutes of Health, 9000 Rockville Pike, Building 31, Conference Room 10, Bethesda, Maryland 20892.

The Council meeting will be open to the public on February 15 from 8:30 a.m. to approximately 3:30 p.m. for discussion of program policies and issues. Attendance by the public is limited to space available.

In accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. section 10(d) of Public Law 92-463, the Council meeting will be closed to the public from approximately 3:30 p.m. to recess on February 15 and from 8:30 a.m. to adjournment on February 16 for the review, discussion and evaluation of individual grant applications. These applications and the discussions could reveal confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy

Ms. Terry Long, Chief, Communications and Public Information Branch, National Heart, Lung, and Blood Institute, Building 31, Room 4A21, National Institutes of Health, Bethesda, Maryland 20892, (301) 496–4236, will provide a summary of the meetings and a roster of the Council members.

Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should contact the Executive Secretary in advance of the meeting.

Dr. Ronald G. Geller, Executive

Dr. Ronald G. Geller, Executive Secretary, National Heart, Lung, and Blood Advisory Council, Rockledge Building (RKL2), Room 7100, National Institutes of Health, Bethesda, Maryland 20892, (301) 435–0261, will furnish substantive program information.

(Catalog of Federal Domestic Assistance Program Nos. 93.837, Heart and Vascular