

Proposed Project

Academic Centers of Excellence on Youth Violence Prevention Program Information System—New—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention.

Background and Brief Description

Eight Academic Centers of Excellence on Youth Violence Prevention (ACEs) and two Urban Partnerships—Academic Centers of Excellence on Youth Violence Prevention (U-PACEs) are currently funded through CDC to foster and promote a stable, visible, long term strategy to address the complex problem of youth violence. The centers work with community members and many educational, justice and social work partners to develop action plans, partnerships, and priorities to prevent youth violence in a local community.

In addition, one ACE Coordinating Center is funded to initiate, foster, and support coordinated efforts, including the development and dissemination of activities and products in youth violence research and practice, among the ACEs, UPACEs, and CDC. It also aims to facilitate increased collaboration among organizations working to prevent youth violence to support the sustainability of youth violence prevention programs.

The Academic Centers of Excellence on Youth Violence Prevention Program Information System will collect, in electronic format: (a) Data needed to measure progress toward, or achievement of, performance indicators and other outcomes and (b) information on Academic Centers of Excellence on Youth Violence Prevention that is currently being collected in various electronic and paper documents. The clerical staff or Program Managers (n=11) will complete the majority of the

system. The principal investigators (n=11) will review the information in the system and add details related to study design and outcomes of projects, as necessary.

An Internet-based information system will allow CDC to monitor, and report on, ACE activities more efficiently. Data reported to CDC through the ACE information system will be used by CDC to identify training and technical assistance needs, monitor compliance with cooperative agreement requirements, evaluate the progress made in achieving center-specific goals, and obtain information needed to respond to Congressional and other inquiries regarding program activities and effectiveness.

There are no costs to respondents except their time to enter data into the Information System.

The total estimated annualized burden hours are 161.

ESTIMATED ANNUALIZED BURDEN

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)
Clerical	11	2	320/60
Directors/Principal Investigators	11	2	120/60

Dated: October 23, 2007.

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES**Centers for Disease Control and Prevention**

[30Day-08-0199]

Proposed Data Collections Submitted for Public Comment and Recommendations

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written

comments should be received within 30 days of this notice.

Proposed Project: Importation of Etiologic Agents, Hosts, and Vectors of Human Disease (42 CFR Part 71.54)—(OMB Control No. 0920-0199)—Extension—Office of the Director (OD), CDC. The Foreign Quarantine Regulations (42 CFR Part 71) set 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 importation of etiologic agents, hosts, and vectors (42 CFR 71.54), requiring persons that import or distribute after importation these materials to obtain a permit issued by the CDC. This request is for the information collection requirements contained in 42 CFR 71.54 for issuance of permits by CDC to importers or distributors after importation of etiologic agents, hosts, or vectors of human disease.

CDC is requesting continued OMB approval to collect this information through the use of two separate forms. On an annual basis, approximately 2,300 laboratory facilities complete these forms to receive permits issued by

CDC. These forms are: (1) Application for Permit to Import or Transport Etiologic Agents, Hosts, or Vectors of Human Disease and (2) Application for Permit to Import or Transport Live Bats.

The Application for Permit to Import or Transport Etiologic Agents, Hosts, or Vectors of Human Disease will be used by laboratory facilities, such as those operated by government agencies, universities, research institutions, and zoologic exhibitions, and also by importers of nonhuman primate trophy materials, such as hunters or taxidermists, to request permits for the importation and subsequent distribution after importation of etiologic agents, hosts, or vectors of human disease. The Application for Permit to Import or Transport Etiologic Agents, Hosts, or Vectors of Human Disease requests applicant and sender contact information; description of material for importation; facility isolation and containment information; and personnel qualifications. Estimated average time to complete this form is 20 minutes.

The Application for Permit to Import or Transport Live Bats will be used by laboratory facilities such as those operated by government agencies, universities, research institutions, and

zoologic exhibitions entities to request importation and subsequent distribution after importation of live bats. The Application for Permit to Import or Transport Live Bats requests applicant

and sender contact information; a description and intended use of bats to be imported; facility isolation and containment information; and personnel qualifications.

There is no cost to respondents other than their time to complete the form. The total estimated annualized burden hours are 767.

ESTIMATED ANNUALIZED BURDEN

Respondents	Number of respondents	Responses per respondent	Average hourly burden
Applicants for 71.54 Application Permit	2,300	1	20/60
Total	2,300		

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Maryam I. Daneshvar,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-08-06BS]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

OWCD Professional Training Program Online Application System—New—Office of Workforce and Career Development (OWCD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The mission of the Career Development Division (CDD), Office of Workforce and Career Development (OWCD), is to prepare an applied public health workforce through training and service. Professionals in public health, epidemiology, medicine, economics, information science, veterinary medicine, nursing, public policy and other related professions seek opportunities to broaden their knowledge and skills to improve the science and practice of public health. Each year CDC's professional training programs receive approximately 685 applications from potential candidates for review and selection. Approximately 230 fellows graduate from these programs each year, and there are approximately 2,700 Epidemic Intelligence Service (EIS) and Preventive Medicine Residency/Fellow (PMR/F) alumni.

The purpose of this project is to efficiently and effectively recruit and select qualified individuals to participate in the CDD professional training programs by collecting information through an online application management system. Alumni of these programs will be asked to update their profiles every three years.

This online application provides the CDD with the information necessary to recruit qualified professionals to participate in public health professions training programs to build critical public health workforce capacity in epidemiology, preventive medicine,

prevention effectiveness/health economics, public health informatics, and public health management and leadership. Further benefit from this online application is the reduction of duplicate candidate records as well as agency resources to administer and process paper records.

The application process includes the following: Submission of the responses to the questions in the online application; submission of academic transcripts, professional credentials, and letters of recommendation; a review by selected programmatic staff and expert panel members; selection of qualified candidates for interview; interview of candidates; and selection of trainees for programs.

The online application questions ask for demographic data, academic history, professional experience, references and description of professional goals. The application questions and data collected are necessary to the application process to determine programmatic eligibility and to ensure that the most highly qualified candidates are chosen for the training programs.

With the exception of their time, the cost to the candidates is minor. One expense depends on their academic institutions since they must obtain and submit all their academic transcripts. Another expense depends on the cost to obtain and submit other professional credentials including professional licenses and certifications. The final expense is the cost to submit letters of recommendation. The total estimated annualized burden in hours is 740.

ESTIMATED ANNUALIZED BURDEN

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
Fellowship Applicants	685	1	40/60
Fellowship and EIS-PMR/F Alumni	1130	1	15/60