specific topical areas as well as invitation to provide information on any matter relevant to ACF's work with and on behalf of AI/AN populations.

HHS received feedback that the original comment period of 60 days was insufficient to provide for comprehensive and responsive input, particularly from AI/AN elected representatives and leadership.

Therefore, HHS is extending the comment period for an additional 60 days to maximize the opportunity for all interested parties to collect relevant data and submit information and feedback in response to the RFI, including the nine specific topical areas for which input is sought.

Dated: February 6, 2017.

Naomi Goldstein,

Acting Assistant Secretary for Children and Families.

[FR Doc. 2017–02730 Filed 2–9–17; 8:45 am] BILLING CODE 4184–34–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Tribal Consultation Meetings

AGENCY: Office of Head Start (OHS), Administration for Children and Families, HHS.

ACTION: Notice of meetings.

SUMMARY: Pursuant to the Improving Head Start for School Readiness Act of 2007, Public Law 110–134, notice is hereby given of two 1-day Tribal Consultation Sessions to be held between the Department of Health and Human Services (HHS), Administration for Children and Families, OHS leadership and the leadership of Tribal Governments operating Head Start (including Early Head Start) programs. The purpose of these Consultation Sessions is to discuss ways to better meet the needs of American Indian and Alaska Native children and their families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations [42 U.S.C. 9835, Section 640(l)(4)].

DATES:

March 14, 2017, from 1:30 p.m. to 5:00 p.m.

August 7, 2017, from 1:30 p.m. to 5:00 p.m.

Locations:

 March 7, 2017—Hotel Albuquerque at Old Town, 800 Rio Grande Blvd. NW., Albuquerque, New Mexico 87104 August 8, 2017—Northern Quest Resort & Casino, 100 North Hayford Road, Airway Heights, WA 99001

FOR FURTHER INFORMATION CONTACT:

Angie Godfrey, Regional Program Manager, Region XI/AIAN, Office of Head Start, email *Angie.Godfrey@acf.hhs.gov*, or phone (202) 205–5811. Additional information and online meeting registration is available at: https://eclkc.ohs.acf.hhs.gov/hslc/hs/calendar/tc2017.

SUPPLEMENTARY INFORMATION: HHS announces OHS Tribal Consultations for leaders of Tribal Governments operating Head Start and Early Head Start programs. The agenda for the scheduled OHS Tribal Consultations in Albuquerque, New Mexico, and Spokane, Washington, will be organized around the statutory purposes of Head Start Tribal Consultations related to meeting the needs of American Indian and Alaska Native children and families, taking into consideration funding allocations, distribution formulas, and other issues affecting the delivery of Head Start services in their geographic locations. In addition, OHS will share actions taken and in progress to address the issues and concerns raised in the 2016 OHS Tribal Consultations.

The Consultation Sessions will be conducted with elected or appointed leaders of Tribal Governments and their designated representatives [42 U.S.C. 9835, Section 640(l)(4)(A)]. Designees must have a letter from the Tribal Government authorizing them to represent the tribe. Tribal Governments must submit the designee letter at least 3 days in advance of the Consultation Session to Angie Godfrey at Angie.Godfrey@acf.hhs.gov. Other representatives of tribal organizations and Native nonprofit organizations are welcome to attend as observers.

A detailed report of each Consultation Session will be prepared and made available within 45 days of the Consultation Sessions to all Tribal Governments receiving funds for Head Start and Early Head Start programs. Tribes wishing to submit written testimony for the report should send testimony to Angie Godfrey at Angie.Godfrey@acf.hhs.gov either prior to each Consultation Session or within 30 days after each meeting. OHS will summarize oral testimony and comments from the Consultation Session in each report without attribution, along with topics of concern and recommendations.

Dated: February 6, 2017.

Ann Linehan,

Acting Director, Office of Head Start. [FR Doc. 2017–02799 Filed 2–9–17; 8:45 am]

BILLING CODE 4184-40-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: HHS-OS-0990-0452-60D]

Agency Information Collection Activities; Proposed Collection; Public Comment Request

AGENCY: Office of the Assistant Secretary for Health, Office of Adolescent Health, HHS.

ACTION: Notice.

SUMMARY: In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, announces plans to submit an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB). Prior to submitting that ICR to OMB, OS seeks comments from the public regarding the burden estimate, below, or any other aspect of the ICR.

DATES: Comments on the ICR must be received on or before April 11, 2017.

ADDRESSES: Submit your comments to *Information.CollectionClearance*@ *hhs.gov* or by calling (202) 690–6162.

FOR FURTHER INFORMATION CONTACT: Information Collection Clearance staff, Information.CollectionClearance@ hhs.gov or (202) 690–6162.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the document identifier HHS-OS-0990-0452-60D for reference.

Information Collection Request Title: Federal Evaluation of Making Proud Choices! (MPC!)

Abstract: The Office of Adolescent Health (OAH), U.S. Department of Health and Human Services (HHS) is requesting approval by OMB on a revised data collection. The Federal **Evaluation of Making Proud Choices!** (MPC) will provide information about program design, implementation, and impacts through a rigorous assessment of a highly popular teen pregnancy prevention curriculum—MPC. This revision to this information collection request includes the follow-up survey instrument, administered approximately 9 and 15 months post baseline, and related to the impact study. The