

Dated: November 27, 2013.

Connie M. Downs,

OPIC Corporate Secretary.

[FR Doc. 2013-28901 Filed 11-27-13; 4:15 pm]

BILLING CODE 3210-01-P

## PEACE CORPS

### Information Collection Request; Submission for OMB Review

**AGENCY:** Peace Corps.

**ACTION:** 60-day notice and request for comments.

**SUMMARY:** The Peace Corps will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval. The purpose of this notice is to allow 60 days for public comment in the **Federal Register** preceding submission to OMB. We are conducting this process in accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

**DATES:** Comments must be submitted on or before January 31, 2014.

**ADDRESSES:** Comments should be addressed to Denora Miller, FOIA/Privacy Act Officer. Denora Miller can be contacted by telephone at 202-692-1236 or email at [pcf@peacecorps.gov](mailto:pcf@peacecorps.gov). Email comments must be made in text and not in attachments.

**FOR FURTHER INFORMATION CONTACT:** Denora Miller at Peace Corps address above.

#### SUPPLEMENTARY INFORMATION:

**Method:** Applicants gain access to the form via a secure online portal. Applicants have to download the form for their health care provider to complete. The completed form can be scanned and uploaded back into the Applicant's secure Peace Corps online portal or they can be faxed or mailed to the Peace Corps Office of Medical Services.

**Title:** Peace Corps Report of Physical Examination (PC 1790S)

**OMB Control Number:** 0420-0549

**Type of Request:** Extension without change of a currently approved collection.

**Affected Public:** Individuals/Physicians.

**Respondents Obligation to Reply:** Voluntary.

**Burden to the Public:**

- Estimated number of respondents/physicians: 4,000/4,000.
- Estimated average burden per response: 90 minutes/45 minutes.
- Frequency of response: one time.
- Annual reporting burden: 6,000 hours/3,000 hours.

e. Estimated annual cost to respondents: Indeterminate

**General Description of Collection:** The Peace Corps Act requires that Volunteers receive health examinations prior to their service. The information collected is required for consideration for Peace Corps Volunteer service. After completion of the Health History Form and after passing preliminary non-health-related assessments, the Applicant will be "nominated" to a program. This nomination does not guarantee an invitation to serve, but it does hold a place so the Applicant may proceed with the process. After a review by the Peace Corps pre-service medical staff of the Health History Form and any supplemental forms that the Applicant is required to submit following nomination (covered under OMB control number 0420-0510), the Applicant may be medically pre-cleared. An Applicant who is medically pre-cleared and who accepts an invitation to serve as a Peace Corps Volunteer undergoes a final medical clearance. Final medical clearance is on the basis of a complete physical examination, as documented in a Report of Physical Examination (PC-1790S).

The information contained in the Report of Physical Examination will be used to make an individualized determination as to whether an Applicant for Volunteer service will, with reasonable accommodation, be able to perform the essential functions of a Peace Corps Volunteer and complete a tour of service without undue disruption due to health problems and, if so, to establish the level of medical and other support, if any, that may be required to reasonably accommodate the Applicant.

**Request For Comment:** Peace Corps invites comments on whether the proposed collections of information are necessary for proper performance of the functions of the Peace Corps, including whether the information will have practical use; the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the information to be collected; and, ways to minimize the burden of the collection of information on those who are to respond, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

This notice is issued in Washington, DC, on November 21, 2013.

Denora Miller,

FOIA/Privacy Act Officer, Management.

[FR Doc. 2013-28731 Filed 11-29-13; 8:45 am]

BILLING CODE 6051-01-P

## PEACE CORPS

### Information Collection Request; Submission for OMB Review

**AGENCY:** Peace Corps.

**ACTION:** 60-day notice and request for comments.

**SUMMARY:** The Peace Corps will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval. The purpose of this notice is to allow 60 days for public comment in the **Federal Register** preceding submission to OMB. We are conducting this process in accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

**DATES:** Comments must be submitted on or before January 31, 2014.

**ADDRESSES:** Comments should be addressed to Denora Miller, FOIA/Privacy Act Officer. Denora Miller can be contacted by telephone at 202-692-1236 or email at [pcf@peacecorps.gov](mailto:pcf@peacecorps.gov). Email comments must be made in text and not in attachments.

**FOR FURTHER INFORMATION CONTACT:** Denora Miller at Peace Corps address above.

#### SUPPLEMENTARY INFORMATION:

**Method:** The Health History Form will be completed online in an interactive process in which only questions relevant to each Applicant's medical history (based on responses to previous questions) are presented.

**Title:** Peace Corps Volunteer Health History Form (PC 1789).

**OMB Control Number:** 0420-0510.

**Type of Request:** Extension without change of a currently approved collection.

**Affected Public:** Individuals.

**Respondents Obligation to Reply:** Voluntary.

**Burden to the Public:**

- Estimated number of respondents: 10,000.
- Estimated average burden per response: 45 minutes.
- Frequency of response: one time.
- Annual reporting burden: 7,500 hours.
- Estimated annual cost to respondents: Indeterminate.

**General Description of Collection:** The Peace Corps Act requires that Volunteers receive health examinations prior to their service. The information collected is required for consideration for Peace Corps Volunteer service. The Health History Form is used to document the medical history of each individual Applicant. It is a self-report of pre-existing medical conditions and

is used to help determine whether the Applicant will, with reasonable accommodation, be able to perform the essential functions of a Peace Corps Volunteer and complete a tour of service without undue disruption due to health problems.

**Request For Comment:** Peace Corps invites comments on whether the proposed collections of information are necessary for proper performance of the functions of the Peace Corps, including whether the information will have practical use; the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the information to be collected; and, ways to minimize the burden of the collection of information on those who are to respond, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

This notice is issued in Washington, DC on November 21, 2013.

**Denora Miller,**

*FOIA/Privacy Act Officer, Management.*

[FR Doc. 2013-28732 Filed 11-29-13; 8:45 am]

**BILLING CODE 6051-01-P**

## PEACE CORPS

### Information Collection Request; Submission for OMB Review

**AGENCY:** Peace Corps.

**ACTION:** 60-Day notice and request for comments.

**SUMMARY:** The Peace Corps will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval. The purpose of this notice is to allow 60 days for public comment in the **Federal Register** preceding submission to OMB. We are conducting this process in accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35).

**DATES:** Comments must be submitted on or before January 31, 2014.

**ADDRESSES:** Comments should be addressed to Denora Miller, FOIA/Privacy Act Officer, Peace Corps, 1111 20th Street NW., Washington, DC 20526. Denora Miller can be contacted by telephone at 202-692-1236 or email at [pcfpr@peacecorps.gov](mailto:pcfpr@peacecorps.gov). Email comments must be made in text and not in attachments.

**FOR FURTHER INFORMATION CONTACT:** Denora Miller at Peace Corps address above.

**SUPPLEMENTARY INFORMATION:** Volunteers serve in developing

countries where western-style healthcare is often not available. Volunteers are placed in remote locations where they may suffer hardship because they have no access to running water and/or electricity. They also may be placed in locations with extreme environmental conditions related to cold, heat or high altitude and they may be exposed to diseases not generally found in the U.S. Volunteers may be placed many hours from the Peace Corps medical office and not have easy access to any health care provider. Therefore, a thorough review of an Applicant's past medical history is an essential first step to determine their suitability for service in Peace Corps.

The forms listed below may be sent to an individual Applicant at one of the following times in the medical review process: (1) After the Applicant completes the Health History Form and receives a nomination; (2) after a Peace Corps nurse reviews the Applicant's Health History Form and any completed forms previously requested; or (3) at the time of the Applicant's physical examination. The information contained in the specific medical evaluation forms will be used to make an individualized determination as to whether an Applicant for Volunteer service will, with reasonable accommodation, be able to meet the essential eligibility requirements for a Peace Corps Volunteer and complete a tour of service without undue disruption due to health problems.

**Method:** Applicants gain access to the forms via a secure online portal. Applicants will have to download the forms for their health care providers to complete. Completed forms can be scanned and uploaded back into the Applicant's secure Peace Corps online portal or they can be faxed or mailed to the Peace Corps Office of Medical Services.

**Title:** Individual Specific Medical Evaluation Forms (16).

**OMB Control Number:** 0420-0550.

**Type of Request:** Extension without change of a currently approved collection.

**Affected Public:** Individuals/Physicians.

**Respondents' Obligation to Reply:** Voluntary.

### Burden to the Public

#### • Allergy Treatment Form

(a) Estimated number of Applicants/physicians: 100/100.

(b) Frequency of response: one time.

(c) Estimated average burden per response: 20 minutes/10 minutes.

(d) Estimated total reporting burden: 33.3 hours/16.7 hours.

(e) Estimated annual cost to respondents: Indeterminate.

#### *General Description of Collection:*

When an Applicant reports that he or she is currently receiving allergy shot treatments, Peace Corps provides the Applicant with an Allergy Treatment Form for his or her treating physician to complete. The Peace Corps is not able to arrange for Volunteers to receive allergy shots during their Peace Corps service. Peace Corps Volunteers generally serve in areas that are isolated and have limited access to Western-trained providers and health care systems. The Applicant completes the form after discussing with his or her physician whether the Applicant will be able to live overseas for 27 months of Peace Corps service without receiving allergy shots. The Applicant is required to certify that the Applicant has discussed stopping allergy shots with his or her physician and that the physician agrees that the allergy shots can be stopped without unreasonable risk of substantial harm to the Applicant's health.

#### • Asthma Evaluation Form

(a) Estimated number of Applicants/physicians: 500/500.

(b) Frequency of response: One time.

(c) Estimated average burden per response: 75 minutes/30 minutes.

(d) Estimated total reporting burden: 625 hours/250 hours.

(e) Estimated annual cost to respondents: Indeterminate.

#### *General Description of Collection:*

When an Applicant reports on the Health History Form symptoms of moderate persistent or severe persistent asthma in the past two years, he or she is provided an Asthma Evaluation Form for the treating physician to complete. The determination of whether the reported symptoms indicate moderate persistent or severe persistent asthma is based on recognized classifications of asthma severity. The Asthma Evaluation Form asks for the physician to document the Applicant's condition of asthma, including any asthma symptoms, triggers, treatments, or limitations or restrictions due to the condition, as well as to certify that the Applicant can safely serve 27 months overseas. This form is used as the basis for an individualized determination as to whether the Applicant will, with reasonable accommodation, be able to meet the essential eligibility requirements for a Peace Corps Volunteer and complete a tour of service without undue disruption due to health problems. This form is also used to determine the type of accommodation that may be needed, such as placement