

much of the burden associated with the regulations is cleared under the OMB numbers for the HEAL forms and electronic submissions used to report required information (listed below). The table listed at the end of this notice contains the estimate of burden for the remaining regulations.

Annual Response Burden for the following regulations is cleared by OMB when the reporting forms are cleared:

OMB Approval No. 0915-0034, Lender's Contract Application and Borrower Deferment Forms, and Borrower Loan Status and Loan Transfers/Purchases and Consolidation Tape Specification and Submission

Reporting

- 42 CFR 60.31(a), Lender annual application
- 42 CFR 60.38(a), Loan Reassignment

Notification

- 42 CFR 60.12(c)(1), Borrower deferment

OMB Approval No. 0915-0036, Lender's Application for Insurance Claim

Reporting

- 42 CFR 60.35(a)(1), Lender due-diligence activities
- 42 CFR 60.35(a)(2), Lender skip-tracing activities
- 42 CFR 60.40(a), Lender documentation to litigate a default
- 42 CFR 60.40(c)(i), (ii), and (iii), Lender default claim
- 42 CFR 60.40(c)(2), Lender death claim
- 42 CFR 60.40(c)(3), Lender disability claim
- 42 CFR 60.40(c)(4), Lender report of student bankruptcy

OMB Approval No. 0915-0043, Promissory Note, Repayment Schedule, Call Report

Notification

- 42 CFR 60.11(e), Establishment of repayment terms-borrower
- 42 CFR 60.11(f)(5), Borrower notice of supplemental repayment agreement
- 42 CFR 60.33(e), Executed note to

borrower
42 CFR 60.34(b)(1), Establishment of repayment terms-lender
42 CFR 60.42(b), Lender Quarterly Report on HEAL Loans Outstanding (Call Report)

OMB Approval No. 0915-0204, Physicians Certification of Permanent and Total Disability

Reporting

- 42 CFR 60.39(b)(2), Holder request to Secretary to determine borrower disability

OMB Approval No. 0915-0227, Federal Health Education Assistance Loan Refinancing Application/Promissory Note

Reporting

- 42 CFR 60.7, Application for loan
- 42 CFR 60.18 Consolidation of a HEAL loan

The estimate of burden for the regulatory requirements of this clearance are as follows:

TABLE OF REGULATORY SECTIONS AND RESPONDENT BURDEN

	Number of respondents	Number of transactions per respondent	Total transactions	Time per response (in hours)	Total burden hours
Reporting Requirements					
28 Lenders		3	86	.55	47
190 Schools4	78	.17	13
Total Reporting					60
Notification Requirements					
28 Lenders		6,855	191,961	.16	30,687
190 Schools		2.15	409	.47	194
7,930 Borrowers		1	7,930	.17	1,322
Total Notification					32,203
Recordkeeping Requirements					
28 Lenders		3,184	89,165	.22	19,974
190 Schools		476	90,453	.25	22,681
Total Recordkeeping					42,655

Total Annual Burden: 74,918 hrs.

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: John Morrall, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.

Dated: December 15, 2003.

Tina M. Cheatham,

Acting Director, Division of Policy Review and Coordination.

[FR Doc. 03-31295 Filed 12-18-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Advisory Council on Migrant Health; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), notice is hereby given of the following meeting:

Name: National Advisory Council on Migrant Health.

Dates and Times: January 14, 2004, 9 a.m. to 5 p.m., January 15, 2004, 9 a.m. to 5 p.m.

Place: Hyatt Regency Bethesda, One Metro Center, Bethesda, Maryland 20814, Phone: (301) 657-1234; Fax: (301) 657-6453.

Status: The meeting will be open to the public.

Agenda: The agenda includes an overview of general Council business activities and priorities. Topics to be addressed will include orientation of new Council members and restructuring subcommittees. In addition, the Council will continue working on the Year 2004 recommendations to the Secretary. Finally, the Council will hear presentations from experts on farmworker issues, including Farmworker Health Services on farmworker health outreach and enabling services, and prevention strategies.

Agenda items are subject to change as priorities indicate.

For Further Information Contact: Anyone requiring information regarding the Council should contact Gladys Cate, Office of Minority and Special Populations, staff support to the National Advisory Council on Migrant Health, Bureau of Primary Health Care, Health Resources and Services Administration, 4350 East-West Highway, Bethesda, Maryland 20814, Telephone (301) 594-0367.

Dated: December 11, 2003.

Tina M. Cheatham,

Acting Director, Division of Policy Review and Coordination.

[FR Doc. 03-31249 Filed 12-18-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; The National Epidemiologic Survey on Alcohol and Related Conditions

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institute on Alcohol Abuse and Alcoholism (NIAAA), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on September 25, 2003, page 55396 and allowed 60 days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or

after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection

Title: The National Epidemiologic Survey on Alcohol and Related Conditions. *Type of Information Collection Request:* REVISION, OMB No. 0925-0484, expiration date, 3/31/2004. *Need and Use of Information Collection:* This study will determine the incidence of alcohol use disorders in a representative sample of the United States population with the primary purpose of estimating the extent and distribution of alcohol consumption, alcohol use disorders and their associated psychological and medical disabilities across major sociodemographic subgroups. The primary objectives of this second wave of this longitudinal study is to understand the relationships between alcohol consumption, alcohol use disorders and their related disabilities with a view towards designing more effective treatment and intervention programs. The findings will provide valuable information concerning: (1) The relationship between alcohol use disorders and their related disabilities in subgroups of the population of special concern; (2) identification of subgroups at high risk for alcohol use disorders that may be complicated by associated psychological and medical disabilities; (3) incidence of alcohol use disorders and their associated disabilities with a view toward understanding their natural history; (4) treatment utilization of alcohol use disorders in order to determine unmet treatment need and linguistic, social, economic and cultural barriers to treatment; (5) the college-aged segment of the population at high risk for binge drinking and its adverse consequences; and (6) the identification of safe and hazardous levels of drinking as they relate to the development of alcohol use disorders and their associated disabilities. *Frequency of Response:* On occasion. *Affected Public:* Individuals. *Type of Respondents:* Adults. The annual reporting burden is as follows: *Estimated Number of Respondents:* 43,093. *Estimated Number of Responses per Respondent:* 1; *Average Burden Hours Per Response:* 1.00; and *Estimated Total Annual Burden Hours Requested:* 43,093. The annualized cost to respondents is estimated at: \$776,000.00. There are no Capital Costs to report. There are no Operating or Maintenance Costs to report.

Request for Comments

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

FOR FURTHER INFORMATION CONTACT:

Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Bridget Grant, Chief, Laboratory of Biometry and Epidemiology, Division of Intramural Clinical and Biological Research, NIAAA, NIH, Willco Building, Suite 514, 6000 Executive Boulevard, Bethesda, Maryland 20892-7003, or call non-toll-free number (301) 443-7370 or E-mail your request, including your address to: Bgrant@willco.niaaa.nih.gov.

Comments Due Date

Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

Dated: December 15, 2003.

Stephen Long,

Executive Officer, NIAAA.

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