

and General Duties for Ocean Transportation Intermediaries and Related Forms.

OMB Approval Number: 3072-0018 (Expires August 31, 2007).

Abstract: Section 19 of the Shipping Act of 1984 (the "Act"), 46 U.S.C. 40901-40904 (2006), as modified by Public Law 105-258 (The Ocean Shipping Reform Act of 1998) and section 424 of Pub. L. 105-383 (The Coast Guard Authorization Act of 1998), provides that no person in the United States may act as an ocean transportation intermediary (OTI) unless that person holds a license issued by the Commission. The Commission shall issue an OTI license to any person that the Commission determines to be qualified by experience and character to act as an OTI. Further, no person may act as an OTI unless that person furnishes a bond, proof of insurance or other surety in a form and amount determined by the Commission to ensure financial responsibility. The Commission has implemented the provisions of section 19 in regulations contained in 46 CFR 515, including financial responsibility forms FMC-48, FMC-67, FMC-68, and FMC-69, Optional Rider Forms FMC-48A and FMC-69A, and its related license application form, FMC-18.

Current Actions: The Commission intends to revise Form FMC-18, Application for a License as an Ocean Transportation Intermediary. Specifically, language is being added to the Privacy Act Notice regarding voluntary disclosure of the applicant's Social Security Number, and the System of Records citation is being updated. In the Paperwork Reduction Act Notice, the estimated time to prepare an Application is being revised from 1.5 hours per response to 2 hours. Throughout the Application, any reference to the Bureau of Consumer Complaints and Licensing ("BCCL") has been changed to the Bureau of Certification and Licensing ("BCL"). Also, language has been added to Question 7(2) in Part B, and to Question 13(3) in Part D, allowing applicant or its qualifying individual to disclose whether he/she has "been declared bankrupt, been subject to a tax lien, or had legal judgment rendered for a debt." In accordance with the Privacy Act of 1974, this would allow the agency, to the greatest extent practicable, to collect information about an applicant that may be used in making a decision with respect to the granting of an OTI license, directly from the applicant.

Type of Review: Revision to an approved information collection.

Needs and Uses: The Commission uses information obtained under this part and through Form FMC-18 to determine the qualifications of OTIs and their compliance with shipping statutes and regulations and to enable the Commission to discharge its duties under the Act by ensuring that OTIs maintain acceptable evidence of financial responsibility. If the collection of information were not conducted, there would be no basis upon which the Commission could determine if applicants are qualified for licensing.

Frequency: This information is collected when applicants apply for a license or when existing licensees change certain information in their application forms.

Type of Respondents: The respondents are persons desiring to obtain a license to act as an OTI. Under the Act, OTIs may be either an ocean freight forwarder, a non-vessel-operating common carrier, or both.

Number of Annual Respondents: The Commission estimates a potential annual respondent universe of 4,765 entities.

Estimated Time Per Response: The time per response for completing Application Form FMC-18 averages 2 hours. The time to complete a financial responsibility form averages 20 minutes.

Total Annual Burden: The Commission estimates the total annual person-hour burden at 3,596 person-hours.

Bryant L. VanBrakle,

Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0990-New]

Agency Information Collection Request; 60-Day Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Agency Information Collection Request. 60-Day Public Comment Request.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed information collection request for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information,

including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden. To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to Sherette.funncoleman@hhs.gov, or call the Reports Clearance Office on (202) 690-6162. Written comments and recommendations for the proposed information collections must be received within 60-days, and directed to the OS Paperwork.

Proposed Project

Meeting Request Routing System for MedicalCountermeasures.gov—New—Office of the Assistant Secretary for Preparedness and Response (ASPR)—Office of the Biomedical Advanced Research and Development Authority (BARDA).

Both naturally occurring and intentional public health threats have the potential to cause catastrophic harm in a variety of ways, including economic repercussions and adverse effects on health, in some cases leading to loss of life. To meet these challenges, federal government encourages open communication with its stakeholders in the research and development communities and in industry. One method of improving this communication will be through the MedicalCountermeasures.gov Web site. The two key functions of the MedicalCountermeasures.gov Web site will be (1) to centrally manage stakeholder requests for meetings with government to present product information related to medical countermeasures against public health disasters, both manmade and naturally occurring; and (2) to provide our stakeholders in industry and academia with information on government sponsored opportunities and events related to medical countermeasures.

In order to route product developers to the most appropriate personnel within the Department of Health and Human Services (HHS), HHS will collect some basic information about the company's product through MedicalCountermeasures.gov. Using this information and a routing system

that has been developed with input from the participating agencies within HHS, including the Office of the Assistant Secretary for Preparedness and Response (ASPR), the Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), and the National Institutes of Health (NIH), *MedicalCountermeasures.gov* will route the meeting request to the appropriate

person within HHS. HHS is collaborating with other agencies in the planning of this project, and hopes to expand this system to other agencies in the future. ASPR is requesting a three year clearance.

HHS expects that the respondents will be made up of developers of medical countermeasures to naturally occurring and intentional public health threats. Participation in this system will be

completely voluntary, and the information that is submitted to the system is for information only. We anticipate that the respondents will make a request on average once a year.

The estimate of 225 respondents is based on the number of stakeholders from the target group who signed up for the Public Health Emergency Medical Countermeasures Stakeholders Workshop.

ESTIMATED ANNUALIZED BURDEN TABLE

Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Developers of medical countermeasures to naturally occurring and intentional public health threats.	225	1	8/60	30
Total	225	30

Dated: July 30, 2007.

Seleda Perryman,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Announcement of Availability of Funds for a Cooperative Agreement To Provide Baccalaureate Nursing Education Supportive of Maternal-Child Nursing at Kabul Medical University (KMU) and Support for the Development of a Nursing Board for Registration and Licensure at the Ministry of Public Health

AGENCY: Department of Health and Human Services, Office of the Secretary, Office of Global Health Affairs.

ACTION: Notice.

SUMMARY: The primary goal of this project is to assist Afghanistan in the development and strengthening of maternal and child health clinics/hospital systems by creating a solid, university-based, culturally-appropriate professional nursing educational program and building upon previous educational and training efforts. Funding is made available for the development of a basic baccalaureate program at Kabul Medical University and a registered nurse completion program at the Institute of Health Sciences (IHS) in Kabul, Afghanistan. The focus of both programs must be toward an emphasis on clinical training, to include the demonstration of direct

patient care alongside Afghan health-care nurse providers.

Announcement Type: Single Eligibility—FY 2007 Initial Announcement.

GSA Catalog of Federal Domestic Assistance: 93.017.

DATES: Application Availability: August 16, 2007. Optional Letter of Intent must be received by 5 p.m. ET August 23, 2007. Applications must be received by 5 p.m. ET August 31, 2007. Award date: September 15, 2007.

SUPPLEMENTARY INFORMATION: The Office of Global Health Affairs (OGHA) within the Department of Health and Human Services (HHS) announces that up to \$625,000 in fiscal year (FY) 2007 funds is available for one cooperative agreement to the Aga Khan Foundation (AKF), to provide support for the development of a basic baccalaureate program at Kabul Medical University and a registered nurse completion program at the Institute of Health Sciences (IHS) in Kabul, Afghanistan to include the implementation of curriculum reform in support of evidence-based theoretical and clinical nursing knowledge and practice in community based maternal-child health at Kabul Medical University, the strengthening of the nursing program at IHS and the development of a systematic program for faculty development and the development of a Board of Nursing for licensure and certification at the Ministry of Public Health (MoPH) of Afghanistan.¹ An emphasis will focus on clinical training,

which will include the demonstration of direct patient care alongside Afghan health-care nurse providers. All care will also reflect an interdisciplinary approach with full participation of the medical and allied health team in the delivery of care. Nurses can be the front-line provider of care and first point of contact in many clinic settings, especially for women and children.

The primary goal of this project is to assist Afghanistan in the development and strengthening of maternal and child health clinics/hospital systems by creating a solid, university-based, culturally-appropriate professional nursing educational program and building upon previous educational and training efforts at the IHS by enhancing its three-year program for basic nursing. The program will be approved initially for a program period of one year in the amount of \$625,000 available (including indirect costs), with continuing awards contemplated for year two and year three. Funding for the cooperative agreement in subsequent years is contingent upon the availability of funds and the satisfactory performance of the recipient.

I. Funding Opportunity Description

Authority: FY 2006 Labor/HHS/Education appropriations act, Pub. L. 109-149, 119 Stat. 2833, 2856 (Dec. 30, 2005), continued by sections 101(a)(5) and 104 of Division B of the FY 2007 Continuing Resolution, Pub. L. 110-5 (Feb. 15, 2007).

Purpose of the Agreement

HHS, in partnership with other relevant U.S. Government Departments and agencies, anticipates involvement in the development, administration and oversight of this program to improve

¹ The Baccalaureate Nursing Education and Nursing Registration and Licensure described in this document are not intended to be equal with U.S. or other Western standards for such training.