Prevention (CDC), 1600 Clifton Rd. NE., Mailstop C–19, Atlanta, GA 30333, telephone (404) 639–3227 or by E-Mail at LCB3@CDC.GOV.

SUPPLEMENTARY INFORMATION: The goal of this CRADA is to seek a partner for collaboration to examine development of research animal models (particularly for non-human primates) to study both the safety and efficacy of CD40L as a vaccine adjuvant. These animal model systems and vaccines will be used to study the ability of CD40L to enhance the immune response to (RSV) vaccine antigens. These studies will focus on humoral immune responses (eg. viral titers), cellular immune responses (eg. cytotoxicity), cytokines and chemokine expression, quantification of cell subsets at the site of infection (i.e. the pulmonary cell infiltrate) and quantification of viral replication in the lungs. Respondents should provide evidence of expertise in the development and evaluation of anti-viral vaccines and vaccine agents, evidence of experience in animal models systems including non-human primate models, commercialization of vaccines and vaccine agents, and supporting data (e.g., publications, proficiency testing, certifications, resumes, etc.) of qualifications for the principal investigator who would be involved in the CRADA. The respondent will develop the final research plan in collaboration with CDC.

Applicant submissions will be judged according to the following criteria:

1. Expertise in development and evaluation of anti-viral (RSV) vaccines;
2. Expertise in evaluation of anti-viral (RSV) vaccines in animal model systems including non-human primates;
3. Evidence of scientific credibility;
4. Evidence of commitment and ability to anti-viral (RSV) vaccines and;
5. Evidence of an existing infrastructure to commercialize successful technologies.

With respect to Government Intellectual Property (IP) rights to any invention not made solely by a CRADA partner's employees for which a patent or other IP application is filed, CDC has the authority to grant to the CRADA partner an exclusive option to elect an exclusive or nonexclusive commercialization license. This option does not apply to inventions conceived prior to the effective date of a CRADA that are reduced to practice under the CRADA, if prior to that reduction to practice, CDC has filed a patent application on the invention and has licensed it or offered to license it to a third party. This CRADA is proposed and implemented under the 1986 Federal Technology Transfer Act: Public Law 99–502, as amended.

The responses must be made to: Lisa Blake-DiSpigna, Technology Development Coordinator, National Center for Infectious Diseases, Centers for Disease Control and Prevention (CDC), 1600 Clifton Rd. NE., Mailstop C–19, Atlanta, GA 30333.

Dated: March 1, 2001.

Joseph R. Carter,

Associate Director for Management and Operations, Centers for Disease Control and Prevention.

[FR Doc. 01–5503 Filed 3–6–01; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

The National Center for HIV, STD and TB Prevention of the Centers for Disease Control and Prevention (CDC) Announces the Following External Consultant Meeting

Name: External Consultant Meeting on Nonoccupational Antiretroviral Postexposure Prophylaxis (nPEP).

Times and Dates: 8 a.m.–5 p.m., May 10, 2001. 8:30 a.m.–3:15 p.m., May 11, 2001.

Place: Atlanta Hilton and Towers-Downtown, 255 Courtland Street, NE, Atlanta, GA 30303.

Status: Open to the public, limited only by the space available.

Purpose: Attendees at this meeting will discuss and make recommendations *as individuals* to the Division of HIV/AIDS Prevention-Surveillance and Epidemiology on matters related to the potential use of antiretroviral medications and other interventions following sexual, injection drug use, and other non-occupational exposures to human immunodeficiency virus with a resulting risk of infection.

Matters To Be Discussed: Agenda items will include: a review of data on the potential efficacy of antiretroviral prophylaxis in occupational, perinatal, and non-human primate retroviral exposures; information on the extent of, and situations leading to requests for, and provision of, nPEP in the United States; whether and how additional data to determine nPEP efficacy in humans can be collected; and whether and how the CDC and the Public Health Service should amend its 1998 statement on nPEP considerations.

Contact Person for More Information: Dr. Dawn K. Smith, Medical Epidemiologist, NCHSTP, CDC, 1600 Clifton Road, NE, M/S E–45, Atlanta, Georgia 30333, telephone 404–639–6165. The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: March 1, 2001.

Carolyn J. Russell,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 01–5504 Filed 3–6–01; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[Notice of Program Announcement No. ACF/ACYF/HS 2001–05]

Fiscal Year 2001 Discretionary Announcement for Nationwide Expansion Competition of Early Head Start; Availability of Funds and Request for Applications

AGENCY: Administration on Children, Youth and Families (ACYF), Administration for Children and Families (ACF), DHHS

ACTION: Notice of Fiscal Year 2001 Early Head Start availability of financial assistance for nationwide expansion and request for applications.

SUMMARY: The Administration on Children, Youth and Families announces approximately $47 million in financial assistance to be competitively awarded to local public and private non-profit and for-profit entities—including Early Head Start and Head Start grantees—to provide child and family development services for low-income families with children under age three and pregnant women. Early Head Start programs provide early, continuous, intensive and comprehensive child development and family support services on a year-round basis to low-income families. The purpose of the Early Head Start program is to enhance children's physical, social, emotional, and intellectual development; to support parents' efforts to fulfill their parental roles; and to help parents move toward self-sufficiency.

Funds will be competitively awarded under this Notice to increase the number of children and families served by the Early Head Start program. There