

be hired as commissioned officers in the U.S. Public Health Service. This notice also solicits applications from sites that are seeking the assistance of these commissioned officers. These commissioned officers will be family practice physicians and dentists. They will be assigned by the National Health Service Corps (NHSC) to the neediest Health Professional Shortage Areas throughout the Nation. The NHSC will pay the salaries, moving expenses and benefits for these commissioned officers.

These officers will be part of a mobile cadre of health care professionals, who, in addition to the services they will provide to patients at their assigned sites, may be called upon to respond to regional and/or national emergencies. The NHSC will assist the officers in acquiring, maintaining and enhancing emergency response skills. Their initial assignments will be no longer than three years in duration, after which, should these clinicians choose to stay in the U.S. Public Health Service, they will progress to new assignments.

Eligible Applicants

Clinicians—Applicants must file a U.S. Public Health Service Commissioned Corps application, meet the requirements for such commissioning, have completed a Family Practice residency or dental school (prior to the start of the assignment), have successfully passed the Family Practice board certification or a regional dental licensing exam (prior to the start of the assignment) and have a current, unrestricted license to practice medicine or dentistry in at least one U.S. State or Territory.

Sites—Applicants must be located in a Health Professional Shortage Area (HPSA) and submit a Proposal for Use of a Commissioned Officer 2003 (and, if not yet approved as an NHSC site, a Recruitment and Retention Assistance Application). All sites to which NHSC clinicians are assigned must accept assignment under Medicare, have appropriate agreements with the applicable State entity to participate in Medicaid and the State Children's Health Insurance Program, see all patients regardless of their ability to pay, and use and post a discounted fee plan. Sites must also understand and accept that these officers will periodically be away from their assigned locations as they train for, or respond to, a regional and/or national health emergency.

Application Requests, Dates and Addresses

Application materials are available for downloading via the Web at: <http://nhsc.bhpr.hrsa.gov>.

Clinicians—Completed applications must be postmarked or delivered to the HRSA Commissioned Corps Operations Office by no later than September 30, 2003. Clinicians are encouraged to submit an application early, as applications will be considered as soon as they are received. Completed applications should be mailed or delivered to: HRSA Commissioned Corps Operations Office, Parklawn Building, Room 13A-22, 5600 Fishers Lane, Rockville, MD 20857. Applications received or postmarked after the deadline date or sent to a different address will be returned to the applicant and not considered.

Sites—Completed applications must be postmarked or delivered to the NHSC by no later than September 30, 2003. Site applications will be evaluated as soon as they are received at NHSC headquarters. Sites will be deemed qualified based on the quality of the application submitted and the score of the HPSA in which they are located, with preference being given to sites in HPSAs with higher scores. Officers will then be assigned to qualified sites on an ongoing basis. Sites are encouraged to apply early so as to have a better chance of acquiring one of the commissioned officers. The number of qualified sites is expected to exceed the limited supply of commissioned officers. Completed site applications should be mailed or delivered to: National Health Service Corps, Parklawn Building, Room 8A-55, 5600 Fishers Lane, Rockville, MD 20857. Applications received or postmarked after the deadline date or sent to a different address will be returned to the applicant and not considered.

Additional Information

Eligible clinicians and sites interested in receiving application material may do so by calling the National Health Service Corps call center at 1-800-221-9393.

Dated: May 2, 2003.

Dennis P. Williams,

Deputy Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Fiscal Year (FY) 2003 Funding Opportunity

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice of funding availability for Community Action Grant for Service Systems Change.

SUMMARY: The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services announces the availability of FY 2003 funds for the grant program described below. A synopsis of this funding opportunity, as well as many other Federal Government funding opportunities, is also available at the Internet site: www.fedgrants.gov.

This notice is not a complete description of the program; potential applicants must obtain a copy of the Request for Applications (RFA), including Part I, Community Action Grant SM 03-007, Part II, General Policies and Procedures Applicable to all SAMHSA Applications for Discretionary Grants and Cooperative Agreements, and the PHS 5161-1 (Rev. 7/00) application form before preparing and submitting an application.

Funding Opportunity Title: Community Action Grant for Service Systems Change—Short Title: Community Action Grant.

Funding Opportunity Number: SM 03-007.

Catalog of Federal Domestic Assistance (CFDA) Number: 93.243.

Authority: Public Health Service Act, as amended, Title V, Part B, Section 520A, 42 U.S.C. [290bb-32] Priority Mental Health Needs of Regional and National Significance.

Funding Instrument: G.

Funding Opportunity Description: The Substance Abuse and Mental Health Services Administration, Center for Mental Health Services (CMHS) announces the availability of \$1,000,000 in funding for Phase II Community Action Grants. Successful Phase I grantees may apply for one-year Phase II grants of up to \$150,000 (direct and indirect).

The purpose of the Community Action Grant Program (CAG) is to promote the adoption of exemplary mental health practices in communities around the country. Community Action Grants support consensus building, infrastructure development, and training activities for the organization and delivery of services to children with

serious emotional disturbance, adults with serious mental illness, and those with co-occurring substance disorders.

Phase I of the CAG program has supported the development of consensus among key stakeholders with the applicant communities or states to adopt an exemplary practice. When consensus is achieved, grantees begin implementation of the practice. Consensus must be demonstrated through a process evaluation report, memoranda of understanding, funding plans and other documentation that demonstrate stakeholders' firm commitment to adopt the practice. Because of limited funding availability in Fiscal 2003, no applications for Phase I grants will be accepted under this announcement.

Phase II supports implementation through infrastructure development, training, program adaptation and evaluation. Grant funds may be used to provide direct services (therapy, case management, or other interventions to service recipients) only in pilot efforts with a small group of participants in preparation for larger scale implementation.

The two phases of the Community Action Grant operate in sequence to ensure that tested, effective, and documented exemplary practices attain the endorsement and support of the community before they are implemented.

Eligible Applicants: Units of State or local governments, tribal governments and organizations, and domestic private nonprofit organizations such as community-based organizations, faith-based organizations, provider and consumer groups, universities, and health care organizations can apply for CAG.

Because only Phase II grants will be awarded under this announcement, only former or current Community Action Grant Phase I grantees are eligible to apply for Phase II awards. Please see the Project Narrative/Review Criteria Section A, Preconditions for further information.

Due Date for Applications: July 8, 2003.

Estimated Funding Available/Number of Awards: Successful Phase I grantees may apply for one-year Phase II grants of up to \$150,000 (direct and indirect). It is expected that six to seven awards will be made in FY 2003 under this announcement. Applications with budgets that exceed \$150,000 will be reviewed without review.

Is Cost Sharing Required: No.
Period of Support: 1 year.

How to Get Full Announcement and Application Materials: Complete

application kits may be obtained from: the SAMHSA Mental Health Information Center at (800) 789-2647, Monday through Friday, 8:30 A.M. to 5 P.M., EDT; TDD: (301) 443-9006; Fax: (301) 984-8796; P.O. Box 42490, Washington, DC 20015. The PHS 5161-1 application form and the full text of the funding announcement are also available electronically via SAMHSA's World Wide Web Home Page: <http://www.samhsa.gov> (Click on "Grant Opportunities").

Contact for Additional Information: David Morrisette, DSW, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, Room 11C-22, 5600 Fishers Lane, Rockville, MD 20857, (301) 443-3653, e-mail: dmorris@samhsa.gov.

Dated: May 5, 2003.

Richard Kopanda,

Executive Officer, Substance Abuse and Mental Health Services Administration.

[FR Doc. 03-11653 Filed 5-8-03; 8:45 am]

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DEPARTMENT OF JUSTICE

Bureau of Citizenship and Immigration Services

Agency Information Collection Activities: Comment Request

ACTION: Request OMB emergency approval; petition for alien relative, Form I-130.

The Department of Homeland Security, Bureau of Citizenship and Immigration Services (BCIS) has submitted an emergency information collection request (ICR) utilizing emergency review procedures, to the Office of Management and Budget (OMB) for review and clearance in accordance with section 1320.13(a)(1)(ii) and (a)(2)(iii) of the Paperwork Reduction Act of 1995. The BCIS has determined that it cannot reasonably comply with the normal clearance procedures under this part because normal clearance procedures are reasonably likely to prevent or disrupt the collection of information. The BCIS is requesting emergency review from OMB of this information collection to ensure that certain immigration benefits are available to eligible applicants. OMB approval has been requested by May 30, 2003. If granted, the emergency approval is only valid for 180 days. ALL comments and/or questions pertaining to this pending request for emergency approval MUST be directed to OMB, Office of

Information and Regulatory Affairs, Attention: Ms. Karen Lee, Department of Homeland Security Desk Officer, 725—17th Street, NW., Suite 10235, Washington, DC 20503. Comments regarding the emergency submission of this information collection may also be submitted via facsimile to Ms. Lee at 202-395-6974.

During the first 60 days of this same period, a regular review of this information collection is also being undertaken. During the regular review period, the BCIS requests written comments and suggestions from the public and affected agencies concerning this information collection. Comments are encouraged and will be accepted until July 8, 2003. During the 60-day regular review, all comments and suggestions, or questions regarding additional information, to include obtaining a copy of the information collection instrument with instructions, should be directed to Mr. Richard A. Sloan, 202-514-3291, Director, Regulations and Forms Services Division, U.S. Department of Homeland Security, Room 4304, 425 I Street, NW., Washington, DC 20536. Written comments and suggestions from the public and affected agencies concerning the proposed collection of information should address one or more of the following four points:

(1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(2) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(3) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

Overview of this information collection:

(1) **Type of Information Collection:** Extension of a currently approved collection.

(2) **Title of the Form/Collection:** Petition for Alien Relative.

(3) **Agency form number, if any, and the applicable component of the Department of Justice sponsoring the collection:** Form I-130. Bureau of