

Comments may also be sent to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue SW, Washington, DC, 20201. Written comments should be received within 30 days of this notice.

Dated: August 11, 1999.

Dennis P. Williams,

Deputy Assistant Secretary, Budget.

[FR Doc. 99-21482 Filed 8-18-99; 8:45 am]

BILLING CODE 4150-04-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention and Agency for Toxic Substances and Disease Registry

[Program Announcement 00017]

Public Health Conference Support Grant Program (Includes HIV Prevention); Availability of Funds

A. Purpose

The Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR) announce the availability of fiscal year (FY) 2000 funds for a grant program for Public Health Conference Support (Includes HIV Prevention). This program addresses the following "Healthy People 2000" priority area(s) for CDC and ATSDR, with the exceptions of Mental Health, and Substance Abuse.

CDC priority areas are; Physical Activity and Fitness; Nutrition; Tobacco; Violent and Abusive Behavior; Unintentional Injuries; Occupational Safety and Health; Environmental Health; Oral Health; Maternal and Infant Health; Heart Disease and Stroke; Cancer; Diabetes and Chronic Disabling Conditions; Sexually Transmitted Diseases; Human Immunodeficiency Virus (HIV), and Immunization and Infectious Disease. Conferences on Mental Health and Substance Abuse should be directed to other Federal Agencies.

The purpose of conference support funding is to provide PARTIAL support for specific non-federal conferences in the areas of health promotion and disease prevention information and education programs, and applied research.

Because conference support by CDC/ATSDR creates the appearance of CDC/ATSDR co-sponsorship, there will be active participation by CDC/ATSDR in the development and approval of the conference agenda. CDC/ATSDR funds

will be expended only for approved portions of the conference.

The mission of CDC is to promote health and quality of life by preventing and controlling disease, injury, and disability.

CDC supports local, State, academic, national, and international health efforts to prevent unnecessary disease, disability, and premature death, and to improve the quality of life. This support often takes the form of education, and the transfer of high quality research findings and public health strategies and practices through symposia, seminars, and workshops. Through the support of conferences and meetings in the areas of public health research, education, prevention research in program and policy development in managed care and prevention application, CDC is meeting its overall goal of dissemination and implementation of new cost-effective intervention strategies.

ATSDR priority areas are: (1) health effects of hazardous substances in the environment; (2) disease and toxic substance exposure registries; (3) hazardous substance removal and remediation; (4) emergency response to toxic and environmental disasters; (5) risk communication; (6) environmental disease surveillance; and (7) investigation and research on hazardous substances in the environment.

The mission of ATSDR is to prevent exposure and adverse human health effects and diminished quality of life associated with exposure to hazardous substances from waste sites, unplanned releases, and other sources of pollution present in the environment.

ATSDR's systematic approaches are needed for linking applicable resources in public health with individuals and organizations involved in the practice of applying such research. Mechanisms are also needed to shorten the time frame between the development of disease prevention and health promotion techniques and their practical application. ATSDR believes that conferences and similar meetings that permit individuals to engage in hazardous substances and environmental health research, education, and application (related to actual and/or potential human exposure to toxic substances) to interact, are critical for the development and implementation of effective programs to prevent adverse health effects from hazardous substances.

B. Eligible Applicants

Applications for CDC support may be submitted by public and private non-profit organizations. Public and private

non-profit entities include but are not limited to State and local governments or their bona fide agents, voluntary associations, foundations, civic groups, scientific or professional associations, universities, and Federally-recognized Indian tribal governments, Indian tribes, or Indian tribal organizations.

ONLY Conferences planned for May 01, 2000 through April 30, 2001 are eligible to apply under this announcement.

Note: Public Law 104-65 states that an organization described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan, or any other form.

Applications for ATSDR support may be submitted by the official public health agencies of the States, or their bona fide agents. This includes the District of Columbia, American Samoa, the Commonwealth of Puerto Rico, the Virgin Islands, the Federated States of Micronesia, Guam, the Northern Mariana Islands, the Republic of the Marshall Island, the Republic of Palau, and Federally-recognized Indian Tribal governments. State organizations, including State universities, State colleges, and State research institutions must establish that they meet their respective State's legislature definition of a State entity or political subdivision to be considered an eligible applicant. Also eligible are nationally recognized associations of health professionals and other chartered organizations generally recognized as demonstrating a need for information to protect the public from the health effects of exposure to hazardous substances.

C. Availability of Funds

Approximately \$900,000 is available from CDC in FY 2000 to fund approximately 35 to 45 awards. It is expected that the average award will be \$20,000. Funding estimates may change. For FY 2000 awards will be made for three cycles A, B & C each for a 12-month budget period within a 12-month project period. See (Appendix 3) for suggested dates of when to apply for funds. No awards will be made during a cycle between the LOI due date and the Award Date unless approved by the awarding office.

State and local health departments applying for HIV prevention conference support funds may only apply under Category 2 (See Appendix 4 Applications Content for HIV Applicants).

Approximately \$50,000 is available from ATSDR in FY 2000 to fund approximately six awards. It is expected

that the average award will be \$8,000, ranging from \$5,000 to \$10,000. It is expected that the awards will begin on or about thirty days before the date of the conference and will be made for a 12-month budget period within a 12-month project period. Funding estimates may change.

Use of Funds

a. CDC and ATSDR funds may be used for direct cost expenditures: Salaries; speaker fees (for services rendered); rental of necessary conference related equipment; registration fees; and transportation costs (not to exceed economy class fare) for non-Federal individuals.

b. CDC and ATSDR funds may be used for only those parts of the conference specifically supported by CDC or ATSDR as documented in the grant award.

c. CDC and ATSDR funds may NOT be used for the purchase of equipment; payments of honoraria (for conferring distinction); alterations or renovations; organizational dues; support entertainment or personal expenses; food or snack breaks; cost of travel and payment of a Federal employee; per diem or expenses other than local mileage for local participants. Travel for CDC/ATSDR employees will be supported by CDC/ATSDR. Travel for other Federal employees will be supported by their respective agencies. When certain meals are an integral and necessary part of a conference (i.e., working meal where business is transacted and/or a bonafide business product is produced), grant funds may be used for such meals (Where meals and/or lodgings are furnished without charge or at a nominal cost, e.g., as part of the registration fee, the proposed per diem or subsistence allowance will take this into consideration.).

d. CDC and ATSDR funds may NOT be used for reimbursement of indirect costs.

e. CDC and ATSDR will NOT fund 100 percent of any conference proposed under this announcement. Part of the cost of the proposed conference must be supported with other than Federal funds.

f. CDC and ATSDR will NOT fund a conference after it has taken place.

g. Although the practice of handing out novelty items at meetings is often employed in the private sector to provide participants with souvenirs, Federal funds cannot be used for this purpose.

Funding Preference

For HIV Applicants Only

Preference may be given to:

a. Conferences sponsored by organizations that serve high-risk populations especially populations and geographic areas that are under-served.

b. Applications consistent with the CDC national goal of assisting in building and maintaining State, local, and community infrastructure and technical capacity to carry out necessary HIV and STD prevention programs.

No preference will be given to organizations that have received funding in past years.

D. Program Requirements

CDC and ATSDR grantees must meet the following requirements:

1. The conference organizer(s) may use CDC's/ATSDR's name only in factual publicity for the conference and should understand that CDC/ATSDR involvement in the conference does not necessarily indicate support for the organizer's general policies, activities, or products or the content of speakers' presentations.

2. Any conference sponsored by CDC shall be held in facilities that are fully accessible to the public as required by the Americans with Disabilities Act Accessibility Guidelines (ADAAG). Accessibility under ADAAG addresses accommodations for persons with sensory impairments as well as persons with physical disabilities or mobility limitations. The Director, or his/her designee, of the CIO(s) providing funds or approving CDC sponsorship of a conference must assure that the proposed meeting facilities comply with ADAAG.

3. Manage all activities related to program content (e.g., objectives, topics, attendees, session design, workshops, special exhibits, speaker's fees, agenda composition, and printing). Many of these items may be developed in concert with assigned CDC or ATSDR project personnel.

4. Provide draft copies of the agenda and proposed ancillary activities to CDC or ATSDR for approval. All but 10% of the total funds awarded for the proposed conference will be restricted pending approval of a full final agenda by CDC or ATSDR. The remaining 90% of funds will be released by letter to the grantee upon that approval. CDC and ATSDR reserve the right to terminate co-sponsorship at any time.

5. Determine and manage all promotional activities (e.g., title, logo, announcements, mailers, press, etc.). CDC or ATSDR must review and approve any materials with reference to CDC or ATSDR involvement or support.

6. Manage all registration processes with participants, invitee, and registrants (e.g., travel, reservations,

correspondence, conference materials and handouts, badges, registration procedures, etc.).

7. Plan, negotiate, and manage conference site arrangements, including all audio-visual needs.

8. If the proposed conference is or includes a satellite broadcast:

(i) Provide individual, on-camera rehearsals for all presenters,

(ii) Provide at least one full dress rehearsal involving the moderator, all presenters, equipment, visuals, and practice telephone calls at least one day before the actual broadcast and as close to the actual broadcast time as possible,

(iii) Provide full scripting and Teleprompter use for the moderator and all presenters,

(iv) Select a professional moderator. Analyze data from conference activities that pertain to the impact on prevention. Adequately assess increased knowledge, attitudes, and behaviors of the target audience.

9. Analyze data from conference activities that pertain to the impact of prevention. Adequately assess increased knowledge, attitudes, and behaviors of the target audience.

10. ATSDR grantees must collaborate with ATSDR staff in reporting and disseminating results and relevant prevention education and training information to appropriate Federal, State, and local agencies, and the general public.

E. Application Content

Note: HIV applicants go to Appendix 4. Letter of Intent (LOI)

Interested applicants are required to submit an original and two copies of a two to three-page in-depth typewritten Letter of Intent (LOI). Upon review of the LOI's, CDC or ATSDR will extend written invitations to perspective applicants to submit applications. CDC or ATSDR will accept applications by invitation only. Availability of funds may limit the number of applicants, regardless of merit, that receive an invitation to submit applications. The LOI should specifically describe the following required information:

1. Title of the proposed conference—include the term “conference,” “symposium,” “workshop,” or similar designation;

2. Location of conference—city, state, and physical facilities required for the conduct of the meeting;

3. Expected registration—the intended audience, approximate number and profession of persons expected to attend;

4. Date(s) of conference—inclusive dates of conference (LOIs without date

of conference will be considered non-responsive to this program announcement and returned to the applicant without review);

5. Summary of conference format, projected agenda (including list of principal areas or topics to be addressed), including speakers or facilitator. In addition, information should be provided about all other national, regional, and local conferences held on the same or similar subject during the last three years; and

6. Justification of the conference, including the problems it intends to clarify and the developments it may stimulate.

Also include the name of the organization, primary contact person's name, mailing address, telephone number, and if available, fax number and e-mail address. The LOI must include the estimated total cost of the conference and the percentage of the total cost (which must be less than 100%) being requested from CDC or ATSDR. Requests for 100 percent funding will be considered non-responsive to this program announcement and will be returned to the applicant without review. Current recipients of CDC and ATSDR funding must provide the award number and title of their funded programs. No Appendixes, booklets, or other documents accompanying the LOI will be considered. An invitation to submit an application will be made on the basis of the proposed conference's relationship, as outlined in the LOI, to the CDC or ATSDR funding priorities and availability of funds. LOIs should be provided by over night mail service, or U.S. postal service.

THE THREE PAGE LIMITATION (INCLUSIVE OF LETTERHEAD AND SIGNATURES) MUST BE OBSERVED OR THE LETTER OF INTENT WILL BE RETURNED WITHOUT REVIEW.

Application

(HIV applicants go to Appendix 4 for HIV application content.)

A letter of intent (LOI) is required for this Program Announcement. Applicants may apply to CDC or ATSDR for conference support only after their LOI has been reviewed by CDC and ATSDR and a written invitation, including an application form, has been received by the prospective applicant. An invitation to submit an application does not constitute a commitment on the part of CDC or ATSDR to fund the application.

In addition to the following required information, use the information in the Program Requirements and Evaluation

Criteria sections to develop the application content.

1. A project summary cover sheet that includes:

- (a) Name of organization.
- (b) Name of conference.
- (c) Location of conference.
- (d) Date(s) of conference.
- (e) Intended audience and number.
- (f) Dollar amount requested.
- (g) Total conference budget amount.

2. A brief background of the organization—include the organizational history, purpose, and previous experience related to the proposed conference topic.

3. A clear statement of the need for and purpose of the conference. This statement should also describe any problems the conference will address or seek to solve, and the action items or resolutions it may stimulate.

4. An elaboration on the conference objectives and target audience. A list should be included of the principal areas or topics to be addressed. A proposed or final agenda must be included.

5. A clear description of the evaluation plan and how it will assess the accomplishments of the conference objectives. A sample of the evaluation instrument that will be used must be included.

6. A step-by-step schedule and detailed operation plan of major conference planning activities necessary to attain specified objectives.

7. Biographical sketches are required for the individuals responsible for planning and implementing the conference. Experience and training related to conference planning and implementation as it relates to the proposed topic should be noted.

8. Letters of endorsement or support—Letters of endorsement or support for the sponsoring organization and its capability to perform the proposed conference activity.

9. Budget plan and justification—A clearly justified budget narrative that is consistent with the purpose, objectives, and operation plan of the conference. This will consist of a budget that includes the share requested from CDC or ATSDR as well as those funds from other sources, including organizations, institutions, conference income and/or registration fees.

The narrative should be no more than 12 double-spaced pages, printed on one side, with one-inch margins, and 12-point font. Pages must be clearly numbered, and a complete index to the application and its appendices must be included. The original and two required copies of the application must be submitted UNSTAPLED AND

UNBOUND. Materials which should be part of the basic plan should not be in the appendices.

F. Submission and Deadline

Letter of Intent (LOI), Letter of Intent
Due Dates: Cycle A: October 1, 1999
For conferences May 1, 2000–April 30, 2001

Cycle B: January 3, 2000, For
Conferences August 1, 2000–July 31, 2001

Cycle C: April 3, 2000, For
Conferences November 1, 2000–September 30, 2001

On or before October 1, 1999, January 3, 2000, or April 3, 2000, applicant must submit an original and two (2) copies of the LOI to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

Application

Applicant invited to apply should submit the original and two copies of PHS application form 5161-1, revised 7/92 (OMB Number 0937-0189). Forms are in the application kit with the letter inviting submission for one of these three dates.

| Application due dates | Earliest possible award dates |
|-----------------------------|-------------------------------|
| CYCLE A: December 13, 1999. | April 1, 2000 |
| CYCLE B: March 13, 2000. | July 1, 2000 |
| CYCLE C: June 16, 2000. | September 30, 2000 |

Applications with a conference date that occurs within sixty days of date of submission of application will be considered non-responsive.

Submit the application to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

Deadline: Letters of Intent and Applications shall be considered as meeting the deadline if they are either:

- (1) Received on or before the date, or
- (2) Postmarked on or before the deadline date and received in time for orderly processing. (Applicants must request a legibly dated U.S. Postal Service Postmark or obtain a legibly dated receipt from a commercial carrier or the U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

(3) Late Applications: Applications, which do not meet the criteria in (1) or (2) above, are considered late

applications, will not be considered, and will be returned to the applicant.

G. Evaluation Criteria

(HIV applicants go to Appendix 5 for Evaluation criteria)

Letter of Intent

A conference is a symposium, seminar, workshop, or any other organized and formal meeting lasting portions of 1 or more days, where persons assemble to exchange information and views or explore or clarify a defined subject, problem, or area of knowledge, whether or not a published report results from such meeting. The conference should support CDC or ATSDR's public health principles in furtherance of CDC's mission or ATSDR's mission.

Application

CDC and ATSDR Public Health Conference Support Grant Program applications are each objectively reviewed utilizing the following evaluation criteria:

Section 1.a., is ATSDR specific

Section 1.b., is CDC specific

Section 1.c., and all other sections in these criteria are applicable to both CDC and ATSDR,

except for HIV Prevention (see Appendix 5)

1. PROPOSED PROGRAM AND TECHNICAL APPROACH (25 points)

a. The public health significance of the proposed conference including the degree to which the conference can be expected to influence the prevention of exposure and adverse human health effects and diminished quality of life associated with exposure to hazardous substances from waste sites, unplanned releases and other sources of pollution present in the environment. (Applicable to ATSDR applications only.)

b. The applicant's description of the proposed conference as it relates to specific non-Federal conferences in the areas of health promotion and disease prevention information/education programs (except mental health, and substance abuse), including the public health need of the proposed conference and the degree to which the conference can be expected to influence public health practices. Evaluation will be based also on the extent of the applicant's collaboration with other organizations serving the intended audience. (Applicable to all CDC applications except ATSDR and HIV.)

c. The applicant's description of conference objectives in terms of quality, specificity, and the feasibility of the conference based on the operational plan.

2. APPLICANT'S CAPABILITY (10 points)

Adequacy of applicants' resources (additional sources of funding, organization's strengths, staff time, proposed physical facilities, etc.) available for conducting conference activities.

3. THE QUALIFICATION OF PROGRAM PERSONNEL (20 points)

Evaluation will be based on the extent to which the application has described:

a. The qualifications, experience, and commitment of the principal staff person, and his/her ability to devote adequate time and effort to provide effective leadership.

b. The competence of associate staff persons, discussion leaders, speakers, and presenters to accomplish conference objectives.

c. The degree to which the applicant demonstrates the knowledge of nationwide and educational efforts currently underway which may affect, and be affected by, the proposed conference.

4. CONFERENCE OBJECTIVES (25 points)

a. The overall quality, reasonableness, feasibility, and logic of the designed conference objectives, including the overall work plan and timetable for accomplishment.

b. The likelihood of accomplishing conference objectives as they relate to disease prevention and health promotion goals, and the feasibility of the project in terms of the operational plan.

5. EVALUATION METHODS (20 points)

Evaluation instrument(s) for the conference should adequately assess increased knowledge, attitudes, and behaviors of the target audience.

6. BUDGET JUSTIFICATION AND ADEQUACY OF FACILITIES (not scored)

The proposed budget will be evaluated on the basis of its reasonableness; concise and clear justification; and consistency with the intended use of grant funds. The application will also be reviewed as to the adequacy of existing or proposed facilities and resources for conducting conference activities.

H. Other Requirements

Technical Reporting Requirements
Provide the Grants Management Office with original plus two copies of:

1. A Performance Report, or in lieu of a performance report, proceedings of the conference, no more than 90 days after the end of the budget/project period.

2. A Financial Status Report, no more than 90 days after the end of the budget/project period.

Send all reports to:
Julia L. Valentine, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, Koger Center, Colgate Bldg., 2920 Brandywine Road, MS E-15, Atlanta, Georgia 30341-3724.

The following additional requirements are applicable to this program. For a complete description of each, see Appendix I.

AR-5 HIV Program Review Panel Requirements.

AR-7 Executive Order 12372 Review.

AR-8 Public Health System Reporting Requirements.

AR-9 Paperwork Reduction Act Requirements.

AR-10 Smoke-Free Workplace Requirements.

AR-11 Healthy People 2000.

AR-12 Lobbying Restrictions.

AR-15 Proof of Non-Profit Status.

AR-20 Conference Support.

I. Authority and Catalog of Federal Domestic Assistance Number

The CDC program is authorized under the Public Health Service Act, section 301 (42 U.S.C. 241, as amended). The Catalog of Federal Domestic Assistance number is 93.283.

The HIV Prevention program is authorized under the Public Health Service Act (42 U.S.C. 317 (k) (2) of the Public Health Service Act, as amended. The Catalog of Federal Domestic Assistance number is 93.941.

The ATSDR program is authorized under sections 104(i) (14) and (15) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA), as amended by the Superfund Amendments and Reauthorization Act of 1986 (SARA), (42 U.S.C. 9604(i) (14) and (15)). The Catalog of Federal Domestic Assistance number is 93.161.

J. Where To Obtain Additional Information

To receive additional written information, call 1-888-GRANTS4 (1-888-472-6874). You will be asked to leave your name and address and will be instructed to identify the Announcement number of interest. See also the CDC home page on the Internet: <http://www.cdc.gov/od/pgo/forminfo.htm>.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from:

Julia L. Valentine, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease

Control and Prevention (CDC), Koger Center, Colgate Bldg., 2920 Brandywine Road, MS E-15, Atlanta, Georgia 30341-3724, Telephone (770) 488-6871, Email address: jxvl@cdc.gov.

For program technical assistance, contact: C.E. Criss Crissman, Resource Analysis Specialist, Office of the Director/Extramural Services Activity, Public Health Practice Program Office (PHPPO), Centers for Disease Control and Prevention (CDC), 4770 Buford Highway, NE, MS K-38, Atlanta, Georgia 30341-3714, Telephone (770) 488-2513, Email address cec1@cdc.gov.

Dated: August 13, 1999.

John L. Williams,

Director, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC).

[FR Doc. 99-21505 Filed 8-18-99; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability and Injury Prevention and Control Special Emphasis Panel: Research Studies to Characterize the Clinical Relevance of HIV Superinfection

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting.

Name: Disease, Disability and Injury Prevention and Control Special Emphasis Panel: Research Studies to Characterize the Clinical Relevance of HIV Superinfection, Program Announcement #99105.

Times and Dates: 9 a.m.-9:30 a.m., August 27, 1999 (Open) 9:30 a.m.-4:30 p.m., August 27, 1999 (Closed).

Place: Professional and Scientific Associates, 2635 Century Parkway, Suite 990, Atlanta, GA. 30345. Telephone 404/633-6477.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Associate Director for Management and Operations, CDC, pursuant to Pub. L. 92-463.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to Program Announcement #99105. Due to administrative delays this notice is published less than 15 days prior to the meeting.

FOR FURTHER INFORMATION CONTACT: Nancy Pearcey, Prevention Support Office, National Center for HIV, STD, and TB Prevention, CDC, Corporate Square Office Park, 11 Corporate Square Boulevard, M/S E07, Atlanta, Georgia 30329, telephone 404/639-8025, e-mail nxp1@cdc.gov.

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: August 12, 1999.

Carolyn J. Russell,

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

[FR Doc. 99-21503 Filed 8-16-99; 12:19 pm]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability and Injury Prevention and Control Special Emphasis Panel: Social and Environmental Interventions to Reduce HIV Incidence

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting.

Name: Disease, Disability and Injury Prevention and Control Special Emphasis Panel: Social and Environmental Interventions to Reduce HIV Incidence, Program Announcement #99106.

Times and Dates: 8:30 a.m.-9 a.m., August 27, 1999 (Open) 9 a.m.-4:30 p.m., August 27, 1999 (Closed).

Place: CDC, Executive Park Building 16, Conference Room B, Executive Park Drive, Atlanta, GA. 30329.

Status: Portions of the meeting will be closed to the public in accordance with provisions set forth in section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Associate Director for Management and Operations, CDC, pursuant to Pub. L. 92-463.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of applications received in response to Program Announcement #99106. Due to administrative delays this notice is published less than 15 days prior to the meeting.

FOR FURTHER INFORMATION CONTACT: Nancy Pearcey, Prevention Support Office, National Center for HIV, STD, and TB Prevention, CDC, Corporate Square Office Park, 11 Corporate Square Boulevard, M/S E07, Atlanta, Georgia 30329, telephone 404/639-8025, e-mail nxp1@cdc.gov.

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: August 12, 1999.

Carolyn J. Russell,

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

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BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Grant To American Public Human Services Association

AGENCY: Office of Family Assistance, ACF, DHHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that an award is being made to the American Public Human Services Association (APHSA) of Washington, DC in the amount of \$15,000 for support to their Executive Leadership Institute. After the appropriate reviews, it has been determined that this proposal qualifies as a sole source award. The Executive Leadership Institute of APHSA is designed by and for State Human Service Administrators and offers various educational activities that will enhance the skills and leadership capacity of State Human Service Administrators and other high-level policy makers involved in implementation of State TANF Programs.

The American Public Human Services Association is a very unique organization in the Welfare Reform community. The mission of APHSA is to develop, promote, and implement public human service policies that improve the health and well being of families, children, and adults. APHSA educates members of Congress, the media, and the broader public on what is happening in the States concerning