

behaviors which may lead to infection. The National Program and Service Record Data Reporting (NPSR) Form

will be used by ETCs to provide standardized reporting of project activities for Federal program

monitoring. The burden estimates are as follows:

Form	Number of respondents	Responses per respondent	Hours per response	Total burden hours
NPSR	15	2	84	2,520

Send comments to Patricia Royston, HRSA Reports Clearance Officer, Room 14-36, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: December 12, 1996.

J. Henry Montes,

Associate Administrator for Policy Coordination.

[FR Doc. 96-32073 Filed 12-17-96; 8:45 am]

BILLING CODE 4160-15-P

Program Announcement for Grant Programs Administered by the Division of Disadvantaged Assistance, Bureau of Health Professions for Fiscal Year 1997

The Health Resources and Services Administration (HRSA) announces that applications will be accepted for two grant programs for fiscal year (FY) 1997 under the authority of title VII of the Public Health Service (PHS) Act (herein referred to as the Act). These programs include:

Grants for Health Careers Opportunity Program (HCOP) (section 740, PHS Act, 42 CFR, part 57, subpart S)
Grants for the Minority Faculty Fellowship Program (MFFP) (section 738(b), PHS Act)

For the Health Careers Opportunity Program, it is anticipated that \$7 million will be available to support approximately 38 competitive (new and renewal) projects. The average cost for each competitive award is estimated to be \$184,210.

For the Minority Faculty Fellowship Program, it is estimated that \$200,000 will be available to support approximately 6 fellowship awards. The average cost for each fellow is estimated to be \$35,000.

Health Careers Opportunity Program (HCOP) (Catalog of Federal Domestic Assistance No. 93.822)

Eligibility and Purpose: Section 740 authorizes the Secretary to make grants to and enter into contracts with schools of allopathic medicine, osteopathic medicine, public health, dentistry, veterinary medicine, optometry, pharmacy, allied health, chiropractic

and podiatric medicine, and public and non-profit private schools which offer graduate programs in clinical psychology and other public or private nonprofit health or educational entities to carry out programs which assist individuals from disadvantaged backgrounds to enter and graduate from such schools.

Grant funds may be used to:

- (1) Identify, recruit, and select individuals from disadvantaged backgrounds for education and training in a health profession;
- (2) Provide, for a period prior to the entry of such individuals into the regular course of education of such a school, preliminary education designed to assist them to complete successfully, such regular course of education at such a school or referring such individuals to institutions providing such preliminary education;
- (3) Facilitate the entry of such individuals in health and allied health professions schools;
- (4) Provide counseling or other services designed to assist such individuals to successfully complete their education at such a school; and
- (5) Inform such individuals of sources of financial aid available to assist them in their health professions education.

Applicants must carry out at least 2 of the five purposes, even if grant funds are requested or awarded for only one of them. It is permissible to request grant support for only one of the purposes if other purposes are financed with non-Federal funds. The project period of Federal support will not exceed 3 years.

Comprehensive HCOP Programs

HHS encourages the consolidation into one proposal HCOP grants among existing HCOP projects in the same institution or among entities in a geographic area of the applicant institution. Grant funds may also support comprehensive HCOP programs-involving formal linkages among several community-based entities and educational institutions in a defined geographic area to achieve an educational continuum. Comprehensive HCOP programs may include: A designated geographic area with

recognized minority/disadvantaged demographics; a program building on existing strengths; and formal linkages among educational institutions, community health care entities, and community organizations.

Eligible Student Participants

Individuals participating in HCOP programs must:

- (1) Be from disadvantaged backgrounds;
- (2) Have completed the junior year of high school (or its equivalent);
- (3) Be a resident of the United States and either a U.S. citizen, a U.S. national, an alien lawfully admitted for permanent residence in the U.S., a citizen of the Commonwealth of the Northern Mariana Islands, or a citizen of the Republic of Palau, or a citizen of the Republic of the Marshall Islands, or a citizen of the Federated States of Micronesia; and
- (4) Must be enrolled and in good standing at the grantee institution or participating school(s).

Review Criteria: The review of applications will take into consideration the following factors:

- (1) The degree to which the proposed project adequately provides for the requirements in 42 CFR, § 57.1805;
- (2) The number and types of individuals who can be expected to benefit from the project;
- (3) The administrative and management ability of the applicant to carry out the proposed project in a cost effective manner, including the validity of the proposed methodology, attainability of objectives, their measurability and outcomes;
- (4) The adequacy of the staff and faculty, including experience and academic background relevant to the training of disadvantaged background students;
- (5) The appropriateness of budget for assuring effective use of Federal funds; and
- (6) The potential of the project to continue without further support under this program.

Statutory Funding Priorities: Section 740 provides that the Secretary shall give funding priority to the following schools:

1. Schools which previously received HCOP grants and increased their first-year enrollment of individuals from disadvantaged backgrounds by at least 20 percent over that enrollment in the base year 1987 (for which the applicant must supply data) by the end of 3 years from the date of the award of the HCOP grant; and

2. Schools which had not previously received an HCOP grant that increased their first-year enrollment of individuals from disadvantaged backgrounds by at least 20 percent over that enrollment in the base year 1987 (for which the applicant must supply data) over any period of time (3 consecutive years).

Administrative Funding Priorities: The following funding priorities were established in fiscal year 1990 after public comment at 55 FR 11264, dated March 27, 1990, and is being continued in FY 1997, with the exception that wording related to alternative means of documenting enrollment in terms of increases and retention rates for disadvantaged students has been deleted. Progress in these areas is considered as a part of the merit review process for this program and applicants will be informed of relevant benchmarks in application materials.

Funding priorities will be given to HCOP applications from:

(1) Health professions schools that have a disadvantaged student enrollment of 20 percent or more; and (2) to schools of allied health offering baccalaureate or higher level programs in physical therapy, physician assistant, respiratory therapy, medical technology or occupational therapy that have a disadvantaged student enrollment of 20 percent or more among those programs.

Statutory Allocation of Funds: Section 740 provides that the Secretary shall obligate amounts in accordance to the following:

(A) 70 percent shall be obligated for grants or contracts to institutions of higher education.

(B) 10 percent shall be obligated for community-based programs.

(C) Not more than 5 percent may be obligated for grants and contracts having the primary purpose of informing individuals about the existence and general nature of health careers.

Minority Faculty Fellowship Program (MFFP) (Catalog of Federal Domestic Assistance No. 93.923)

Purpose: The purpose of the MFFP is to increase the number of underrepresented minority faculty members in health professions schools, by providing fellowships to individuals who have the potential for teaching, administering programs, or conducting

research as faculty members. To be eligible for a grant, an institution must demonstrate that it has or will have the commitment and ability to: (1) identify, recruit, and select underrepresented minorities in the health professions; (2) provide fellows with the techniques and skills needed to secure a tenured faculty position at the applicant school, including competence in: pedagogical skills, research methodology, development of research grant proposals, writing and publication skills, working with minority populations; (3) assist fellows in their preparation for an academic career, including the provision of mentors; and (4) provide health services to medically underserved communities. Fellows must work under the direct supervision of a senior level faculty member engaged in the disciplines mentioned above. The institution must offer the fellow a teaching position at the institution upon successful completion of the program.

The period of Federal support will not exceed one year for each fellowship award to an applicant institution, but a fellowship award to an individual recipient must be for a minimum of two years. HRSA *does not* contribute to the support of the fellow in the second year. The applicant institution (school) will be required to support the fellow for the second year at a level not less than the total of Federal and institutional funds awarded for the first year.

The fellowship award includes a stipend in an amount not exceeding 50 percent of the regular salary of a similar faculty member, or \$30,000, whichever is less. Grant awards are to support fellow costs *only* and are limited to stipend, tuition and fees, and travel. Stipends must be paid by the grantee institution in accordance with its usual institutional payment policy, schedule and procedures. Stipend funds may be supplemented through other resources. Direct financial assistance to fellows may not be received concurrently with any other Federal education award (fellowship, traineeship, etc.), except for educational assistance under the Veterans Readjustment Benefits Act ("GI Bill"). Loans from Federal funds are not considered Federal awards. Any fellow who continues to receive full institutional salary is not eligible for stipend support from these grant funds.

Eligible Applicants: Eligible applicants are schools of allopathic medicine, osteopathic medicine, dentistry, veterinary medicine, optometry, podiatric medicine, pharmacy, public health, clinical psychology, and other public or private nonprofit health or educational entities.

The Applicant Institution Shall Agree to the Following Assurances:

* Provide an assurance that the applicant institution will make available (directly through cash donations) \$1 for every \$1 of Federal funds received under the fellowship.

* Provide an assurance that institutional support will be provided for the individual for a second year at a level not less than the total amount of Federal and institutional funds provided in the year in which the grant was awarded;

* Provide an assurance that the fellowship recipient is from a minority group underrepresented in the health professions; has at a minimum, appropriate advanced preparation (such as a master's or doctoral degree in a health profession) and special skills necessary to enable that individual to teach and practice;

* Provide an assurance that the recipient of the fellowship will be a member of the faculty of the applicant institution; and

* Provide an assurance that the recipient of the fellowship has not been a member of the faculty of any school at any time during the 18-month period preceding the date on which the individual submits a request for the fellowship.

Fellowship recipients must also:

* Have completely satisfied any other obligation for health professional service which is owed under an agreement with the Federal Government, State Government, or other entity prior to beginning the period of service under this program; and

* Be a resident of the United States and either a U.S. citizen, a U.S. national, an alien lawfully admitted for permanent residence in the U.S., a citizen of the Commonwealth of the Northern Mariana Islands, or a citizen of the Republic of Palau, or a citizen of the Marshall Islands, or a citizen of the Federated States of Micronesia.

Breach of Fellowship Funds: The school will be required to return fellowship funds received if it does not honor the terms of the fellowship award. Such sums must be paid within 1 year from the day the Secretary determines that the breach occurred. If payment is not received by the payment date, additional interest, penalties and administrative charges will be assessed in accordance with Federal Law (45 CFR 30.13).

Review Criteria: The review of applications will take into consideration the following review criteria:

1. The extent to which the institution demonstrates that it has the commitment and ability to identify,

recruit, and select underrepresented minority faculty, and its ability to provide health services to rural or medically underserved populations;

2. The extent to which the institution's training program will provide the fellow with the preparation, training and skills needed to secure an academic career. Training may include: Pedagogical skills, program administration, grant writing and publication skills, research methodology and development of research grant proposals, and community service abilities;

3. The degree to which the institution's senior faculty are involved in the training and preparation of fellows pursuing an academic career, and the potential of the institution to continue the program without Federal support beyond the approved project period; and

4. The extent to which the institution meets the eligibility requirements set forth in section 738(b) of the Public Health Service Act.

Definitions

The following definitions were established after public comment of 56 FR 22440, dated May 15, 1991.

"Minority" means an individual whose race/ethnicity is classified as American Indian or Alaskan Native, Asian or Pacific Islander, Black, or Hispanic.

"Underrepresented Minority" means, with respect to a health profession, racial and ethnic populations that are underrepresented in the health profession relative to the number of individuals who are members of the population involved. This definition encompasses Blacks, Hispanics, Native Americans, and, potentially, various subpopulations of Asian individuals.

Applicants must evidence that any particular subgroup of Asian individuals is underrepresented in a specific discipline.

The following definitions were established in OMB Directive No. 15.

"American Indian or Alaskan Native" means a person having origins in any of the original people of North America, and who maintain cultural identification through tribal affiliation or community recognition. This definition applies to the Health Careers Opportunity Program.

"Asian or Pacific Islander" means a person having origins in any of the original people of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

"Black" means a person having origins in any of the black racial groups of Africa.

"Hispanic" means a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

Following are additional definitions as defined in section 799.

"Accredited" when applied to a school of medicine, optometry, podiatry, pharmacy, public health or chiropractic, or a graduate program in health administration, clinical psychology, clinical social work, or marriage and family therapy, means a school or program that is accredited by a recognized body or bodies approved for such purpose by the Secretary of Education, except that a new school or program that, by reason of an insufficient period of operation, is not, at the time of application for a grant or contract under this title, eligible for accreditation by such a recognized body or bodies, shall be deemed accredited for purposes of this title, if the Secretary of Education finds, after consultation with the appropriate accreditation body or bodies, that there is reasonable assurance that the school or program will meet the accreditation standards of such body or bodies prior to the beginning of the academic year following the normal graduation date of the first entering class in such school or program.

"Graduate program in health administration" and "graduate program in clinical psychology" means an accredited graduate program in a public or nonprofit private institution in a State that provides training leading, respectively, to a graduate degree in health administration or an equivalent degree and a doctoral degree in clinical psychology or an equivalent degree.

"Schools of allied health" means a public or nonprofit private college, junior college, or university or hospital-based educational entity that:

(1) Provides, or can provide, programs of education to enable individuals to become allied health professionals or to provide additional training for allied health professionals;

(2) Provides training for not less than a total of 20 persons in the allied health curricula (except that this subparagraph shall not apply to any hospital-based educational entity);

(3) Includes or is affiliated with a teaching hospital; and

(4) Is accredited by a recognized body or bodies approved for such purposes by the Secretary of Education or which provides to the Secretary satisfactory assurance by such accrediting body or

bodies that reasonable progress is being made toward accreditation.

"Schools of medicine, dentistry, osteopathic medicine, pharmacy, optometry, podiatric medicine, veterinary medicine, public health, and chiropractic" means an accredited public or nonprofit private school in a State that provides training leading, respectively, to degrees of doctor of medicine, dentistry, osteopathy, a degree of bachelor of science in pharmacy, degrees of doctor of pharmacy, doctor of optometry, doctor of podiatric medicine, doctor of veterinary medicine, a graduate degree in public health, a degree of doctor of chiropractic medicine, or appropriate equivalent degrees for the above training, and including advanced training related to such degrees provided by any such school.

"State" includes the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, the Republic of Palau, the Republic of the Marshall Islands, the Federated States of Micronesia, Virgin Islands, Guam and American Samoa.

Other Definitions

"Community-based Program" means a program with organizational headquarters located in and which primarily serves: a Metropolitan Statistical Area, as designated by the Office of Management and Budget; a Bureau of Economic Analysis, U.S. Department of Commerce designated non-metropolitan economic area or a county; or Indian tribe(s) as defined in 42 CFR 36.102(c), i.e., an Indian tribe, band, nation, rancheria, Pueblo, colony or community, including an Alaskan Native Village or regional or village corporation.

"Funding Priority" means a favorable adjustment of aggregate review scores of individual approved applications when they meet specific criteria.

For the Health Careers Opportunity Program, "health professions schools" mean schools of allopathic medicine, dentistry, osteopathic medicine, pharmacy, optometry, podiatric medicine, veterinary medicine, public health, chiropractic, or graduate programs in clinical psychology and health administration.

As defined in 42 CFR 57.1804(c) (1) and (2), an "individual from a disadvantaged background" means an individual who:

(1) Comes from an environment that has inhibited the individual from obtaining the knowledge, skills and abilities required to enroll in and graduate from a health professions

school or from a program providing education or training in an allied health profession or;

(2) Comes from a family with an annual income below a level based on low-income thresholds according to family size, published by the U.S. Bureau of the Census, adjusted annually for changes in the Consumer Price Index and adjusted by the Secretary for use in all health professions programs. The following income figures determine what constitutes a low-income family for purposes of these Health Careers Opportunity Program grants for fiscal year 1997:

Size of parents' family ¹	Income level ²
1	\$10,200
2	13,200
3	15,700
4	20,200
5	23,800
6+	26,700

¹ Includes only dependents listed on Federal income tax forms.

² Adjusted gross income for calendar year 1995, rounded to nearest \$100.

"Metropolitan Statistical Area" means a city of 50,000 or more population; or a Census Bureau defined urbanized area of at least 50,000 population, provided that the component county/counties have a total population of at least 100,000 (75,000 in New England).

For the Minority Faculty Fellowship Program, "minority" means an individual from a racial or ethnic group that is under-represented in the health professions, as defined in section 738.

"Stipend" means a level of support for pre-doctoral students for participation in programs that meet specific HCOP requirements. The stipend level is \$40 a day based on the actual number of days a participant attends classes. The time period covered is the first day of classes to the end of final examination week for each quarter or semester. Stipends may also be given for a minimum of 6 weeks or a maximum of 8 weeks in a summer program. A stipend may *not* be provided

between the end of the academic year and the beginning of a summer program.

"Structured Program" means a formal educational program of a specified length with a specially designed curriculum or set of activities in which designated trainees are required to participate (e.g., summer and/or academic year enrichment program which focus on such areas as mathematics, science, learning/communication skills, professional school entrance exams, and the like).

Other Information

National Health Objectives for the Year 2000

The Public Health Service urges applicants to submit work plans that address specific objectives of Healthy People 2000. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report; Stock No. 017-001-00474-0) or *Healthy People 2000* (Summary Report; Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (Telephone 202-783-3238).

Academic and Community Partnerships

As part of its cross-cutting program priorities, HRSA will be targeting its efforts to strengthening linkages between U.S. Public Health Service health professions education programs and programs which provide comprehensive primary care services to the underserved.

Smoke-Free Workplace

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products and Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

Application Availability

Application materials are available on the World Wide Web at address: "http://www.hrsa.dhhs.gov/bhpr/grants.html". In Fiscal Year 1997, the Bureau of Health Professions (BHPr) will use Adobe Acrobat to publish the grants documents on the Web page. In order to download, view and print these grants documents, you will need a copy of Adobe Acrobat Reader. This can be obtained without charge from the Internet by going to the Adobe Web page ("http://www.adobe.com") and downloading the version of the Adobe Acrobat Reader which is appropriate for your operating system, i.e., Windows, Unix, Macintosh, etc. A set of more detailed instructions on how to download and use the Adobe Acrobat Reader can be found on the BHPr Grants Web page under "Notes on this WWW Page."

If additional programmatic information is needed, please contact the Division of Disadvantaged Assistance, Bureau of Health Professions, Health Resources and Services Administration, Parklawn Building, Room 8A-09, 5600 Fishers Lane, Rockville, Maryland 20857. Questions regarding grants policy and business management issues should be directed to the Grants Management Branch in Room 8C-26 at the above address. Please refer to Table 1 for specific BHPr contact names and phone numbers.

For applicants who are unable to access application materials electronically, a hard copy will be provided by contacting the HRSA Grants Application Center. The Center may be contacted by: Telephone Number: 1-888-300-HRSA, FAX Number: 301-309-0579, E-mail Address: HRSA.GAC@IX.NETCOM.COM

Completed applications should be returned to: Grants Management Officer (CFDA#), HRSA Grants Application Center, 40 West Gude Drive, Suite 100, Rockville, Maryland 20850.

TABLE 1

PHS Section number title CFDA number regulation	Grants management contact e-mail: wjohnson @hrsa.dhhs.gov FAX: (301) 443-6343	Programmatic contact e-mail: bbrooks @hrsa.dhhs.gov FAX: (301) 443-5242	Deadline date
740 Health Careers Opportunity Program 93.822 42 CFR part 57 subpart S.	Wilma Johnson (301) 443-6880	Mario A. Manecchi, MPH, (301) 443-4493	2/7/97
738(b) Minority Faculty Fellowship Program 93.923.	Wilma Johnson (301) 443-6880	Lucille Revels (301) 443-4493	2/7/97

Application Forms

The standard application form PHS 6025-1, HRSA Competing Training Grant Application, General Instructions and supplement for these grant programs have been approved by the Office of Management and Budget under the Paperwork Reduction Act. The OMB Clearance Number is 0915-0060.

Deadline Dates

The deadline dates for receipt of applications for each of these grant programs are shown in Table 1. Applications will be considered to be "on time" if they are either:

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

Late applications not accepted for processing will be returned to the applicant. In addition, applications which exceed the page limitation and/or do not follow format instructions will not be accepted for processing and will be returned to the applicant.

Paperwork Reduction Act

The standard application form PHS 6025-1 (Revised 9/96), HRSA Competing Training Grant Application, and General Instructions have been approved by the Office of Management and Budget under the Paperwork Reduction Act. The OMB Clearance Number is 0915-0060.

These programs are not subject to the provisions of Executive Order 12372, Intergovernmental Review of Federal Programs (as implemented through 45 CFR part 100). These programs are also not subject to the Public Health System Reporting Requirements.

Dated: December 12, 1996.

Ciro V. Sumaya,
Administrator.

[FR Doc. 96-32074 Filed 12-17-96; 8:45 am]

BILLING CODE 4160-15-P

National Institutes of Health

National Institute on Alcohol Abuse and Alcoholism; Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting:

Purpose/Agenda: To review two contract proposals.

Name of Committee: National Institute on Alcohol Abuse and Alcoholism Special Emphasis Panel.

Date of Meeting: December 19, 1996 (Telephone conference).

Time: 11:00 a.m.

Place of Meeting: Willco Building, 6000 Executive Blvd. Bethesda, MD 20892-7003.

Contact Person: Sean O'Rourke, 6000 Executive Blvd, Suite 409, Bethesda, MD 20892-7003, 301-443-2861.

The meeting will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5 U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

This notice is being published less than 15 days prior to the meeting due to the urgent need to meet timing limitations imposed by the review and funding cycle.

(Catalog of Federal Domestic Assistance Program No. 93.271, Alcohol Research Career Development Awards for Scientists and Clinicians; 93.272, Alcohol National Research Service Awards for Research Training; 93.273, Alcohol Research Programs; 93.891, Alcohol Research Center Grants; National Institutes of Health)

Dated: December 11, 1996.

Paula N. Hayes,

Acting Committee Management Officer, NIH.

[FR Doc. 96-32087 Filed 12-17-96; 8:45 am]

BILLING CODE 4140-01-W

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4174-N-03]

Notice of Extension of Application Deadline for the Notice of Funding Availability for: the HUD-Administered Small Cities Community Development Block Grant (CDBG) Program, Development Grants—Fiscal Year 1997; and the Section 108 Loan Guarantee Program for Small Communities in New York State

AGENCY: Office of the Assistant Secretary for Community Planning and Development, HUD.

ACTION: Notice of Funding Availability (NOFA) for CDBG small Cities Development Grants for fiscal year (FY) 1997; Notice of extension of application deadline.

SUMMARY: On December 3, 1996 (61 FR 64196), HUD published a Notice of Funding Availability (NOFA) that announced the availability of CDBG

Small Cities development grants and guaranteed loans to fund eligible development activities related to the New York canal system. The December 3, 1996 NOFA is part of the Canal Corridor Initiative, a multiyear effort designed to revitalize the economic base of communities in upstate New York through development projects and job creation along the canal system and connecting waterways.

The purpose of this notice is to extend the application deadline in the December 3, 1996 NOFA to March 4, 1997.

DATES: Applications are due on or prior to March 4, 1997. Applications, if mailed, must be postmarked by the United States Postal Service no later than midnight on March 4, 1997. Overnight delivery items received within ten (10) days after March 4, 1997 will be deemed to have been received by that date, upon submission of documentary evidence that they were placed in transit with the overnight delivery service by no later than March 3, 1997. If an application is hand-delivered to the New York or the Buffalo Office, the application must be delivered to the appropriate office by no later than 4:00 p.m. on the deadline date, March 4, 1997.

The above-stated application deadline is firm as to date and hour. In the interest of fairness to all competing applicants, HUD will treat as *ineligible for consideration* and application that is not received by 4:00 p.m. on, or postmarked by, March 4, 1997.

Applicants should take this policy into account and make early submission of their materials to avoid any risk of loss of eligibility brought about by unanticipated delays or other delivery-related problems.

ADDRESSES: Completed applications will be accepted at the following addresses:

1. *For the nonentitled CDBG jurisdictions in and county of Ulster and nonparticipating jurisdictions in the urban county of Dutchess:* Department of Housing and Urban Development, Office of Community Planning and Development, Attention: Small Cities Coordinator, 26 Federal Plaza, New York, NY 10278-0068. Telephone (212) 264-0771; and

2. *For the nonentitled CDBG jurisdictions in and counties of Albany, Cayuga, Clinton, Columbia, Erie, Essex, Greene, Herkimer, Madison, Monroe, Montgomery, Niagara, Oneida, Onondaga, Ontario, Orleans, Oswego, Rensselaer, Saratoga, Schenectady, Schuyler, Seneca, Tompkins, Warren, Washington, Wayne and Yates:* Department of Housing and Urban