extension of Office of Management and Budget (OMB) approval of the application form for the Nursing Education Loan Repayment Program (NELRP). The NELRP was originally authorized by 42 U.S.C. 297b(h) (section 836(h) of the Public Health Service Act) as amended by Public Law 100–607, November 4, 1988. The NELRP is currently authorized by 42 U.S.C. 297(n) (section 846 of the Public Health Service Act) as amended by Public Law 102–408, October 13, 1992. The application form is currently approved under OMB No. 0915–0140, which expires 12/31/97.

Under the NELRP, registered nurses are offered the opportunity to enter into a contractual agreement with the

Secretary, under which the Public Health Service agrees to repay the nurses' indebtedness for nursing education. In exchange, the nurses agree to serve for a specified period of time in certain types of health facilities identified in the statute.

Nurse educational loan repayment contracts will be approved by the Secretary for eligible nurses who have incurred previous monetary indebtedness by accepting a loan for nursing education costs from a bank, credit union, savings and loan association, insurance company, Government agency or program, school, or other lender that meets NELRP criteria.

Approval is requested for the application form. The application form requires information from two types of respondents:

a. Applicants must provide information on the proposed service site and on all nursing education loans for which reimbursement is requested, and

b. Lenders must provide information on loan status for all loans accepted for repayment.

The application form is not being changed, so the estimates of average burden to complete the forms remains the same. Burden estimates are as follows:

Form/regulatory requirement	Number of respondents	Responses per re- spondent	Hours per response	Total bur- den hours
NELRP Application Loan Verification Form Total	1,000 *200 1,200	1 1	1.5 .25	1,500 50 1,550

^{*}The remainder of the loans are verified through credit reports.

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: June 12, 1997.

James J. Corrigan,

Acting Associate Administrator for Management and Program Support.
[FR Doc. 97–15995 Filed 6–17–97; 8:45 am]
BILLING CODE 4160–15–U

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301) 443–1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: Consortia Development for Health Professions Training in Community-Based Settings—New—Consortia which include academic institutions and community-based providers have been proposed as one mechanism for improving collaboration between health professions schools and communities, enabling them to provide relevant educational experiences and facilitating meeting education and workforce goals. The consortia should be based on a formal association of academic health professions training schools or programs and community-based providers (e.g., community/migrant health centers, managed care organizations) involved, at least, in part, in the entry-level education and/or continuing education of health professionals. The purposes of this project are (1) to prepare an inventory of consortia for health professions education, (2) to examine the characteristics of successful consortia, and (3) to examine the role that consortia play in assisting health professions schools or programs to prepare health care providers for the evolving health care system.

An initial survey will be conducted by mail of consortia identified through informal conversations with key academic representatives, communitybased providers, and other knowledgeable individuals, and a literature review. The initial survey will be used to gather information needed to determine whether the consortia meet the study definition, and, for those that do, to collect additional information that generally describes the consortia, including their goals and accomplishments. From the information gathered in the initial survey, 20 consortia will be selected for additional study as models of successful consortia, based on criteria established by an advisory workgroup.

The second survey will consist of phone interviews with up to 20 of the consortia identified as successful models from the initial survey. These data will describe the characteristics of successful consortia in more detail (leadership, organizational models, missions and goals, financing arrangements, facilitating factors, and barriers). Data will also be collected to determine the role that consortia play in assisting health professional schools to prepare health care providers for the evolving health care system. The burden estimates are as follows:

Form name	No. of re- spondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Mail Survey of Consortia:					

Form name	No. of re- spondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Meeting study definition Not meeting study definition Telephone Follow-up of Successful Models Total	100	1	100	.5	50
	200	1	200	.1	20
	20	1	20	2	40
	300	1.1	320	.34	110

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Virginia Huth, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, D.C. 20503.

Dated: June 12, 1997.

James J. Corrigan,

Acting Associate Administrator for Management and Program Support. [FR Doc. 97-15997 Filed 6-17-97; 8:45 am] BILLING CODE 4160-15-U

DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

Health Resources and Services Administration

Advisory Commission on Childhood Vaccines; Request for Nominations for **Voting Members**

AGENCY: Health Resources and Services Administration.

ACTION: Notice.

SUMMARY: The Health Resources and Services Administration (HRSA) is requesting nominations to fill three vacancies on the Advisory Commission on Childhood Vaccines (ACCV). The ACCV was established by title XXI of the Public Health Service Act (the Act), as enacted by Public Law (Pub. L.) 99-660 and as subsequently amended, and advises the Secretary of Health and Human Services (the Secretary) on issues related to implementation of the National Vaccine Injury Compensation Program (VICP).

FOR FURTHER INFORMATION CONTACT: Ms. Melissa Palmer, Principal Staff Liaison, Policy Management and Outreach Branch, Division of Vaccine Injury Compensation, at (301) 443–1533.

DATES: Nominations are to be submitted by July 18, 1997.

ADDRESSES: All nominations are to be submitted to the Director, Division of Vaccine Injury Compensation, Bureau of Health Professions, HRSA, Parklawn Building, Room 8A-35, 5600 Fishers Lane, Rockville, Maryland 20857.

SUPPLEMENTARY INFORMATION: Under the authorities that established the ACCV, viz., the Federal Advisory Committee Act of October 6, 1972 (Pub. L. 92-463) and section 2119 of the Act, 42 U.S.C. 300aa-19, as added by Public Law 99-660 and amended, HRSA is requesting nominations for three voting members of the ACCV.

The ACCV advises the Secretary on the implementation of the VICP; on its own initiative or as the result of the filing of a petition, recommends changes in the Vaccine Injury Table; advises the Secretary in implementing the Secretary's responsibilities under section 2127 regarding the need for childhood vaccination products that result in fewer or no significant adverse reactions; surveys Federal, State, and local programs and activities relating to the gathering of information on injuries associated with the administration of childhood vaccines, including the adverse reaction reporting requirements of section 2125(b); advises the Secretary on means to obtain, compile, publish, and use credible data related to the frequency and severity of adverse reactions associated with childhood vaccines; and recommends to the Director, National Vaccine Program Office, research related to vaccine injuries which should be conducted to carry out the VICP.

The ACCV consists of nine voting members appointed by the Secretary as follows: three health professionals, of whom at least two are pediatricians, who are not employees of the United States, who have expertise in the health care of children, the epidemiology, etiology and prevention of childhood diseases, and the adverse reactions associated with vaccines; three members from the general public, of whom at least two are legal representatives (parents or guardians) of children who have suffered a vaccine-related injury or death; and three attorneys, of whom at least one shall be an attorney whose specialty includes representation of persons who have suffered a vaccinerelated injury or death, and one shall be an attorney whose specialty includes representation of vaccine manufacturers. In addition, the Director of the National Institutes of Health, the

Assistant Secretary for Health, the

Director of the Centers for Disease Control and Prevention, and the Commissioner of the Food and Drug Administration (or the designees of such officials) serve as nonvoting ex officio members.

Specifically, HRSA is requesting nominations for three voting members of the ACCV representing: (1) A health professional with special experience in childhood diseases; (2) an attorney whose specialty includes representation of vaccine manufacturers; and (3) a member from the general public—this category requires three general public members, of whom at least two are legal representatives (parents or guardians) of children who have suffered a vaccinerelated injury or death—by this notice, the Department is soliciting nominations for the third general public position. Nominees will be invited to serve 3-year terms beginning January 1, 1998, and ending December 31, 2000.

Interested persons may nominate one or more qualified persons for membership on the ACCV. Nominations shall state that the nominee is willing to serve as a member of the ACCV and appears to have no conflict of interest that would preclude the ACCV membership. Potential candidates will be asked to provide detailed information concerning such matters as financial holdings, consultancies, and research grants or contracts to permit evaluation of possible sources of conflicts of interest. A curriculum vitae should be submitted with the nomination.

The Department of Health and Human Services has special interest in assuring that women, minority groups, and the physically handicapped are adequately represented on advisory committees and therefore extends particular encouragement to nominations for appropriately qualified female, minority, or physically handicapped candidates.

Dated: June 12, 1997.

Claude Earl Fox,

Acting Administrator. [FR Doc. 97-15996 Filed 6-17-97; 8:45 am] BILLING CODE 4160-15-P