

collection requirements relating to the continuation of an existing collection for Performance Progress Reports for Older Americans Act Title IV grantees.

DATES: Submit written or electronic comments on the collection of information by May 31, 2009.

ADDRESSES: Submit electronic comments on the collection of information to:

lori.stalbaum@aoa.hhs.gov.

Submit written comments on the collection of information to Lori Stalbaum, Administration on Aging, Washington, DC 20201 or by fax to Lori Stalbaum at 202-357-3469.

FOR FURTHER INFORMATION CONTACT: Lori Stalbaum at 202-357-3452 or *lori.stalbaum@aoa.hhs.gov.*

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501-3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. "Collection of information" is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency request or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, AoA is publishing notice of the proposed collection of information set forth in this document. With respect to the following collection of information, AoA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of AoA's functions, including whether the information will have practical utility; (2) the accuracy of AoA's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques when appropriate, and other forms of information technology.

The Administration on Aging (AoA) plans to continue an existing approved collection of information for semi-annual and final reports pursuant to requirements in Title IV of the Older Americans Act. Through its Title IV

program, AoA supports projects for the purpose of developing and testing new knowledge and program innovations with the potential for contributing to the well-being of older Americans. Deliverables required by AoA of all Title IV grantees are semi-annual and final reports, as provided for in the Department of Health and Human Services regulations, 45CFR Part 74, Section 74.51. These Title IV grantee performance reporting requirements can be found on AoA's Web site at http://www.aoa.gov/AoARoot/Grants/Reporting_Requirements/docs/FinalReportHandbook.doc. AoA estimates the burden of this collection of information as follows: *Frequency:* Semi-annually with the Final report taking the place of the semi-annual report at the end of the final year of the grant. *Respondents:* States, public agencies, private nonprofit agencies, institutions of higher education, and organizations including tribal organizations. *Estimated Number of Responses:* 600. *Total Estimated Burden Hours:* 12,000.

Dated: April 1, 2009.

Edwin L. Walker,

Acting Assistant Secretary for Aging.

[FR Doc. E9-7847 Filed 4-6-09; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (240) 276-1243.

Comments are invited on: (a) Whether the proposed collections of information are necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the

information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program: Phase V (OMB No. 0930-0280)—Revision

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), is responsible for the National Evaluation of the comprehensive Community Mental Health Services for Children and Their Families Program, which collects data on child mental health outcomes, family life, and service system development and performance. Data will be collected on 30 service systems and roughly 8,810 children and families.

The data collection for this evaluation will be conducted for a three-year period. The core of service system data will be collected twice (every 18 to 24 months) during the three-year evaluation period. A sustainability survey will be conducted in selected years. Service delivery and system variables of interest include the following: maturity of system of care development; adherence to the system of care program model; services received by youth and their families, and the costs of those services; and consumer service experience.

The length of time that individual families will participate in the study ranges from 18 to 36 months depending on when they enter the evaluation. Child and family outcomes of interest will be collected at intake and during subsequent follow-up interviews at six-month intervals. Client service experience information is collected at these follow-up interviews. Measures included in an outcome interview are determined by the type of assessment (intake or follow-up), child's age, and whether the respondent is the caregiver or a youth.

The outcome measures include the following: Child symptomatology and functioning, family functioning, material resources, and caregiver strain. The caregiver interview package includes the Caregiver Information Questionnaire, Child Behavior Checklist, Behavioral and Emotional Rating Scale (BERS), Education Questionnaire, Columbia Impairment Questionnaire, Living Situations Questionnaire, Family Life Questionnaire, and Caregiver Strain Questionnaire at intake, and also

includes the Multi-service Sector Contacts Form, Culturally Competence and Service Provision Questionnaire and the Youth Services Survey (a national outcome measurement tool) at follow-up assessments. Caregivers of children under age 6 complete the Vineland Screener to assess development, and do not complete the BERS. The Youth Interview package includes the Youth Information Questionnaire, Revised Children's Manifest Anxiety Scale, Reynolds Depression Scale, BERS (youth version), Delinquency Survey, Substance Use

Survey, GAIN-Quick: Substance Dependence Scale, and Youth Services Survey (youth version).

The evaluation also includes three special studies: (1) An evidence-based practices study that examines the effects of various factors on the implementation and use of evidence-based treatments and approaches in system of care communities; (2) A cultural and linguistic competence study that examines the extent to which the cultural and linguistic characteristics of communities influence program implementation and provider

adaptation of evidence-based treatments, and provider service delivery decisions based on provider culture and language; and (3) An evaluation of the communities' use of reports produced by the national evaluation for continuous quality improvement. The national evaluation measures address the national outcome measures for mental health programs as currently established by SAMHSA.

Table 1 summarizes which national evaluation components are unchanged from the original 2006 submission and which are new or changed.

TABLE 1—STUDY COMPONENT AND INSTRUMENT REVISIONS FOR PHASE V RE-SUBMISSION

	New or changed for 2009 resubmission	No change	Nature of change
System of Care Assessment			
Site Visit Tables	X	
Interview Protocols .....	.....	X
Inter-Agency Collaboration Scale (IACS) .....	.....	X
Longitudinal Child and Family Outcome Study			
Caregiver Information Questionnaire (CIQ-I)	X	Question 39a skip pattern revised Question 39d list of medications up- dated.
Caregiver Information Questionnaire (CIQ-F)	X	Question 39a skip pattern revised Question 39d list of medications up- dated.
Caregiver Strain Questionnaire (CGSQ)	X	Slight wording change to inter- viewer note and the term “day care” changed to “childcare”.
Child Behavior Checklist (CBCL)/Child Behavior Checklist 1½-5 (CBCL 1½-5).	.....	X
Education Questionnaire—Revised (EQ-R)	X	.....
Living Situations Questionnaire (LSQ) .....	.....	X
Family Life Questionnaire (FLQ) .....	.....	X
Behavioral and Emotional Rating Scale—Second Edition—Parent Rat- ing Scale (BERS-2C).	.....	X
Columbia Impairment Scale (CIS) .....	.....	X
Vineland Screener (VS) .....	.....	X
Delinquency Survey—Revised (DS-R) .....	.....	X
Behavioral and Emotional Rating Scale—Second Edition, Youth Rating Scale (BERS-2Y).	.....	X
Gain-Quick Substance Related Issues (Gain Quick-R) .....	.....	X
Substance Use Survey—Revised (SUS-R) .....	.....	X
Revised Children’s Manifest Anxiety Scales (RCMAS) .....	.....	X
Reynolds Adolescent Depression Scale—Second Edition (RADSD-2) .....	.....	X
Youth Information Questionnaire (YIQ-I) .....	.....	X
Youth Information Questionnaire (YIQ-F) .....	.....	X
Service Experience Study			
Multi-Sector Service Contacts Questionnaire—Revised (MSSC-R)	X	Slight modification to Card 4 and Cards 6 and 7 are new.
Evidence-Based Practices Experience Measure (EBPEM) .....	.....	X
Cultural Competence and Service Provision Questionnaire (CCSP) .....	.....	X
Youth Services Survey for Families (YSS-F) .....	.....	X
Youth Services Survey (YSS) .....	.....	X
Services and Costs Study			
Flex Funds Data Dictionary	X	New.
Services and Costs Data Dictionary	X	New.
Sustainability Study			
Sustainability Survey	X	

TABLE 1—STUDY COMPONENT AND INSTRUMENT REVISIONS FOR PHASE V RE-SUBMISSION—Continued

	New or changed for 2009 resubmission	No change	Nature of change
Continuous Quality Improvement (CQI) Initiative Evaluation			
CQI Initiative Survey	X	.....	New.
CQI Initiative Interview Guide	X	.....	New.
Evidence-Based Practices Study			
System-level Implementation Factors Discussion Guide	X	.....	New.
Service-level Implementation Factors Discussion Guide	X	.....	New.
Consumer-level Implementation Factors Discussion Guide	X	.....	New.
Cultural and Linguistic Competence Study			
CCIOSAS—Beneficiaries of Self-Assessment Findings Focus Group Guide—Staff and Partners.	X	.....	New.
CCIOSAS—Beneficiaries of Self-Assessment Findings Focus Group Guide—Caregivers.	X	.....	New.
CCIOSAS—Beneficiaries of Self-Assessment Findings Focus Group Guide—Youth.	X	.....	New.
CCIOSAS—Participants in Self-Assessments Focus Group Guide—Staff and Partners.	X	.....	New.
CCIOSAS—Participants in Self-Assessments Focus Group Guide—Caregivers.	X	.....	New.
CCIOSAS—Participants in Self-Assessments Focus Group Guide—Youth.	X	.....	New.
CCIOSAS—Users of Self-Assessment Findings Focus Group Guide—Staff and Partners.	X	.....	New.
CCIOSAS—Users of Self-Assessment Findings Focus Group Guide—Caregivers.	X	.....	New.
CCIOSAS—Users of Self-Assessment Findings Focus Group Guide—Youth.	X	.....	New.
CCIOSAS—Telephone Interview—Staff and Partners	X	.....	New.
CCEBPS—Managers of EBP Process Focus Group Guide	X	.....	New.
CCEBPS—Providers of EBP Focus Group Guide	X	.....	New.
CCEBPS—Family Focus Group Guide	X	.....	New.
CCEBPS—Youth Focus Group Guide	X	.....	New.
CCEBPS—Telephone Interview	X	.....	New.

Internet-based technology will be used for data entry and management, and for collecting data using Web-based surveys. The average annual respondent burden, with detail provided about burden contributed by specific measures, is estimated below. The

estimate reflects the average number of respondents in each respondent category, the average number of responses per respondent per year, the average length of time it will take for each response, and the total average annual burden for each category of

respondent and for all categories of respondents combined.

Note: Total burden is annualized over a 3-year period.

TABLE 2—DETAILED ESTIMATE OF RESPONDENT BURDEN

Instrument	Respondent	Number of respondents	Total aver- age number of re- sponses per respondent	Hours per response	Total burden hours	3-year average annual bur- den hours
System of Care Assessment						
Interview Guides and Data Collection Forms	Key site informants	¹ 630	1	1.00	630	210
Interagency Collaboration Scale (IACS)	Key site informants	630	1	0.13	82	27
Longitudinal Child and Family Outcome Study						
Caregiver Information Questionnaire (CIQ-IC)	Caregiver	² 8,810	1	0.283	2,493	831
Caregiver Information Questionnaire Followup (CIQ-FC).	Caregiver	8,810	2	0.200	3,524	1,175
Caregiver Strain Questionnaire (CGSQ)	Caregiver	8,810	³ 3	0.167	4,414	1,471
Child Behavior Checklist (CBCL)/Child Behavior Checklist 1½–5 (CBCL 1½–5).	Caregiver	8,810	3	0.333	8,801	2,934
Education Questionnaire—Revised (EQ-R) ...	Caregiver	8,810	3	0.333	8,801	2,934
Living Situations Questionnaire (LSQ)	Caregiver	8,810	3	0.083	2,194	731

TABLE 2—DETAILED ESTIMATE OF RESPONDENT BURDEN—Continued

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	3-year average annual burden hours
The Family Life Questionnaire (FLQ)	Caregiver	8,810	3	0.050	1,322	441
Behavioral and Emotional Rating Scale—Second Edition, Parent Rating Scale (BERS-2C).	Caregiver	⁴ 7,488	3	0.167	4,193	1,398
Columbia Impairment Scale (CIS)	Caregiver	⁵ 8,369	3	0.083	2,084	695
The Vineland Screener (VS)	Caregiver	⁶ 1,321	3	0.250	330	110
Delinquency Survey—Revised (DS-R)	Youth	⁷ 5,286	3	0.167	2,648	883
Behavioral and Emotional Rating Scale—Second Edition, Youth Rating Scale (BERS-2Y).	Youth	5,286	3	0.167	2,648	883
Gain-Quick Substance Related Issues (Gain Quick-R).	Youth	5,286	3	0.083	1,316	439
Substance Use Survey—Revised (SUS-R) ...	Youth	5,286	3	0.100	1,586	529
Revised Children's Manifest Anxiety Scales (RCMAS).	Youth	5,286	3	0.050	793	264
Reynolds Adolescent Depression Scale—Second Edition (RADS-2).	Youth	5,286	3	0.050	793	264
Youth information Questionnaire—Baseline (YIQ-I).	Youth	5,286	1	0.167	883	294
Youth information Questionnaire—Follow-up (YIQ-F).	Youth	5,286	2	0.167	1,766	589
Service Experience Study						
Multi-Sector Service Contacts—Revised (MSSC-R).	Caregiver	8,810	⁸ 2	0.250	4,405	1,468
Evidence-Based Practice Measure (EBPEM)	Caregiver	8,810	2	0.167	2,943	981
Cultural Competence and Service Provision Questionnaire (CCSP).	Caregiver	8,810	2	0.167	2,943	981
Youth Services Survey—Family (YSS-F)	Caregiver	8,810	2	0.117	2,062	687
Youth Services Survey (YSS)	Youth	5,286	2	0.083	877	292
Services and Costs Study						
Flex Funds Data Dictionary	Local staff compiling/entering data.	⁹ 2,670	¹⁰ 3	.033	218	73
Services and Costs Data Dictionary	Local staff compiling/entering data.	¹¹ 10,680	¹² 100	.033	29,073	9,691
Sustainability Study						
Sustainability Survey	Caregiver	¹³ 52	2	0.75	78	26
Sustainability Survey	Provider/Administrator	156	2	0.75	234	78
Continuous Quality Improvement (CQI) Initiative Evaluation						
CQI Initiative Survey	Key community staff ...	150	1	0.5	75	25
CQI Initiative Interview Guide	Key community staff ...	50	1	1.0	50	17
Evidence-Based Practices Study						
System-level Implementation Factors Discussion Guide.	SOC leadership team member.	90	1	0.75	68	23
Service-level Implementation Factors Discussion Guide.	Provider	60	1	0.75	45	15
Consumer-level Implementation Factors Discussion Guide.	Caregivers	30	1	0.5	15	5
Cultural and Linguistic Competence Study						
CCIOSAS—Beneficiaries of Self-Assessment Findings Focus Group Guide.	Provider	40	1	1.0	40	13
CCIOSAS—Beneficiaries of Self-Assessment Findings Focus Group Guide.	Administrators/Managers.	20	1	1.5	30	10
CCIOSAS—Beneficiaries of Self-Assessment Findings Focus Group Guide.	Caregivers	40	1	.75	30	10
CCIOSAS—Beneficiaries of Self-Assessment Findings Focus Group Guide.	Youth	40	1	.75	30	10
CCIOSAS—Participants in Self-Assessments Focus Group Guide.	Provider	40	1	1.0	40	13

TABLE 2—DETAILED ESTIMATE OF RESPONDENT BURDEN—Continued

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	3-year average annual burden hours
CCIOSAS—Participants in Self-Assessments Focus Group Guide.	Administrators/Managers.	20	1	1.5	30	10
CCIOSAS—Participants in Self-Assessments Focus Group Guide.	Caregivers	16	1	.75	12	4
CCIOSAS—Participants in Self-Assessments Focus Group Guide.	Youth	16	1	.75	12	4
CCIOSAS—Users of Self-Assessment Findings Focus Group Guide.	Provider	40	1	1.0	40	13
CCIOSAS—Users of Self-Assessment Findings Focus Group Guide.	Administrators/Managers.	20	1	1.5	30	10
CCIOSAS—Users of Self-Assessment Findings Focus Group Guide.	Caregivers	16	1	.75	12	4
CCIOSAS—Users of Self-Assessment Findings Focus Group Guide.	Youth	16	1	.75	12	4
CCIOSAS—Telephone Interview	Providers	2	1	1.0	2	0.67
CCIOSAS—Telephone Interview	Administrators/Managers.	3	1	1.0	3	1
CCEBPS—Managers of EBP/PBE Interventions Focus Group Guide.	Providers	16	1	1.0	16	5
CCEBPS—Managers of EBP/PBE Interventions Focus Group Guide.	Administrators/Managers.	20	1	1.5	30	10
CCEBPS—Providers of EBP/PBE Interventions Focus Group Guide.	Providers	40	1	1.0	40	13
CCEBPS—Family Focus Group Guide	Caregivers	40	1	.75	30	10
CCEBPS—Youth Focus Group Guide	Youth	40	1	.75	30	10
CCEBPS—Telephone Interview Guide	Providers	2	1	1.0	2	0.67
CCEBPS—Telephone Interview Guide	Administrators/Managers.	3	1	1.0	3	1

TABLE 3—SUMMARY ESTIMATE OF RESPONDENT BURDEN

[Summary of annualized burden estimates for 3 years]

	Number of distinct respondents	Number of responses per respondent	Average burden per response (hours)	Total annual burden (hours)
Caregivers	8,810	2.46	2.36	51,147
Youth	5,286	2.56	0.99	13,397
Community staff	870	72.22	0.86	54,035
Total Summary	14,996	6.54	.....	118,579
Total Annual Average Summary	4,989	2.18	.....	39,526

¹ An average of 21 stakeholders in up to 30 grant communities will complete the System of Care Assessment interview. These stakeholders will include site administrative staff, providers, agency representatives, family representatives, and youth.

² Number of respondents across 30 grantees. Average based on a 5 percent attrition rate at each data collection point.

³ Average number of responses per respondent is a weighted average of the possible numbers of responses per respondent for communities beginning data collection in FY2007 and FY2008. The maximum numbers of responses per respondent are for 24 communities beginning data collection in FY2007, 1 follow-up data collection point remaining for children recruited in year 2 (of grant community funding), 3 for children recruited in year 3, 4 for children recruited in year 4, and 4 for children recruited in year 5. The maximum numbers of responses per respondent are, for 6 communities beginning data collection in FY2008, 3 follow-up data collection points remaining for children recruited in year 2 (of grant community funding), 5 for children recruited in year 3, 6 for children recruited in year 4, and 4 for children recruited in year 5.

⁴ Approximate number of caregivers with children over age 5, based on Phase V data submitted as of 12/08.

⁵ Approximate number of caregivers with children 3 and older, based on Phase V data submitted as of 12/08.

⁶ Approximate number of caregivers with children 5 or under, based on Phase V data submitted as of 12/08.

⁷ Based on Phase III and IV finding that approximately 60 percent of the children in the evaluation were 11 years old or older.

⁸ Respondents only complete Service Experience Study measures at follow-up points. See Footnote #3 for the explanation about the average number of responses per respondent.

⁹ Staff will enter data on flexible funds expenditures into a Web-based application or will recode existing data on flexible funds expenditures to match the Flex Funds Data Dictionary format. Each community will use flexible funds expenditures on average for approximately one-quarter of the estimated 356 children/youth enrolled, suggesting a total of 89 children/youth will receive services from flexible funds per community. Thus, there will be data entered for $89 \times 30 = 2,670$ children/youth using the Flex Funds Data Dictionary.

¹⁰ Assumes that three expenditures, on average, will be spent on each child/youth receiving flexible fund benefits.

¹¹ Staff will collect paper-based forms from agencies and enter them into a Web-based application or will extract data from agencies' existing data systems. Staff will recode data to match the Services and Costs Data Dictionary format. Service and costs records will be compiled for all $356 \times 30 = 10,680$ children/youth enrolled.

¹² Assumes that each child/youth will have 100 service episodes, on average, during his/her time in a system of care.

¹³ This survey will be administered at 5 sites funded in 2006, 25 sites funded in 2005, 2 sites funded in 2000, and 20 sites funded in 1999.

Send comments to Summer King, SAMHSA Reports Clearance Officer, Room 7-1044, One Choke Cherry Road, Rockville, MD 20857 and e-mail her a copy at summer.king@samhsa.hhs.gov. Written comments should be received within 60 days of this notice.

Dated: April 1, 2009.

Elaine Parry,

Director, Office of Program Services.

[FR Doc. E9-7779 Filed 4-6-09; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Building Strong Families (BSF) Demonstration and Evaluation Impact Study Second Follow-up.

OMB No.: 0970-0304.

Description: The Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS), anticipates continuing data collection for the 15-month follow-up surveys of the Building Strong Families (BSF) Demonstration and Evaluation. Data collection will continue for an additional 6 months beyond the current date of expiration (July 31, 2009).

This data collection is a part of the BSF evaluation, which is an important opportunity to learn if well-designed interventions can help low-income couples develop the knowledge and relationship skills that research has shown are associated with healthy marriages. The BSF evaluation uses an experimental design that randomly assigns couples who volunteer to participate in BSF programs to a program or control group.

Materials for the original 15-month data collection effort, previously submitted to OMB, covered impact and implementation data collections. Data collection for the impact study is complete. ACF anticipates collecting data for an additional 6 months in order to complete data collection for the entire sample of participants.

Respondents: Couples enrolled in the BSF evaluation, including program and control groups.

ANNUAL BURDEN ESTIMATES

Instrument	Annual number of respondents	Number of responses per respondent	Average burden hours per response	Estimated annual burden hours
15-month telephone survey (female partner)	1,434	1	.91	1,305
15-month telephone survey (male partner)	1,434	1	.83	1,190

Total Burden Hours: 2,495.

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: OPRE Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: OPREinfocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should

be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Fax: 202-395-6974, Attn: Desk Officer for the Administration for Children and Families.

Dated: March 30, 2009.

Brendan C. Kelly,

OPRE Reports Clearance Officer.

[FR Doc. E9-7501 Filed 4-6-09; 8:45 am]

BILLING CODE 4184-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects:

Title: Head Start Grant Application and Budget Instruments.

OMB No.: 0970-0207.

Description: The Office of Head Start is proposing to renew, without changes, the Head Start Grant Application and Budget Instrument, which standardizes the grant application information that is requested from all Head Start and Early Head Start grantees applying for continuation grants. The application and budget forms are available in a password-protected, Web-based system. Completed applications can be transmitted electronically to Regional and Central Offices. The Administration for Children and Families believes that this application form makes the process of applying for Head Start program grants more efficient for applicants.

Respondents: Head Start and Early Head Start grantees.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
HS grant and budget instrument	1,600	1	33	52,800
<i>Estimated Total Annual Burden Hours:</i>				52,800