amended (5 U.S.C. App.), notice is hereby given of the following meetings.

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

Name of Committee: National Institute of Mental Health Special Emphasis Panel, Confirmatory Efficacy Clinical Trials of Non-Pharmacological Interventions for Mental Disorders.

Date: February 3, 2017.

Time: 10:00 a.m. to 3:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Marcy Ellen Burstein, Ph.D., Scientific Review Officer Division of Extramural Activities, National Institute of Mental Health, NIH Neuroscience Center, 6001 Executive Blvd., Room 6143, MSC 9606, Bethesda, MD 20892–9606, (301) 443–9699, bursteinme@mail.nih.gov.

Name of Committee: National Institute of Mental Health Special Emphasis Panel, Interventions/Biomarkers Special Emphasis Panel.

Date: February 3, 2017.

Time: 1:00 p.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Marcy Ellen Burstein,
Ph.D., Scientific Review Officer Division of
Extramural Activities, National Institute of
Mental Health, NIH Neuroscience Center,
6001 Executive Blvd., Room 6143, MSC 9606,
Bethesda, MD 20892–9606, (301) 443–9699,
bursteinme@mail.nih.gov.

Name of Committee: National Institute of Mental Health Special Emphasis Panel, NIMH Biobehavioral Research Awards for Innovative New Scientists (NIMH BRAINS). Date: February 8, 2017.

Time: 11:00 a.m. to 5:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health Neuroscience Center, 6001 Executive Boulevard, Rockville, MD 20852 (Virtual Meeting).

Contact Person: Megan Kinnane, Ph.D., Scientific Review Officer Division of Extramural Activities, National Institute of Mental Health, NIH Neuroscience Center, 6001 Executive Blvd., Room 6148, MSC 9609, Rockville, MD 20852–9609, (301) 402–6807, libbeym@mail.nih.gov.

(Catalogue of Federal Domestic Assistance Program No. 93.242, Mental Health Research Grants, National Institutes of Health, HHS)

Dated: January 11, 2017.

Melanie J. Pantoja,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2017–00899 Filed 1–17–17; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Office of the Director; Notice of Charter Renewal

In accordance with Title 41 of the U.S. Code of Federal Regulations, Section 102–3.65(a), notice is hereby given that the Charter for the National Toxicology Program Special Emphasis Panel was renewed for an additional two-year period on January 7, 2017.

It is determined that the National Toxicology Program Special Emphasis Panel is in the public interest in connection with the performance of duties imposed on the National Institutes of Health by law, and that these duties can best be performed through the advice and counsel of this group.

Inquiries may be directed to Jennifer Spaeth, Director, Office of Federal Advisory Committee Policy, Office of the Director, National Institutes of Health, 6701 Democracy Boulevard, Suite 1000, Bethesda, Maryland 20892 (Mail code 4875), Telephone (301) 496–2123, or spaethj@od.nih.gov.

Dated: January 11, 2017.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 2017–00900 Filed 1–17–17; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

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

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

Project: Assessment of the Communities Talk: Town Hall Meetings To Prevent Underage Drinking—(OMB No. 0930– 0288)—Revision

The Substance Abuse and Mental Health Services Administration/Center for Substance Abuse Prevention (SAMHSA/CSAP) is requesting a revision from the Office of Management and Budget (OMB) of the information collection regarding the Assessment of the Communities Talk: Town Hall Meetings to Prevent Underage Drinking. The current data collection has approval under OMB No. 0930-0288, Assessment of the Town Hall Meetings on Underage Drinking Prevention, which expires on January 31, 2017. Revisions were made to the two existing data collection instruments: the Organizer Survey and the Participant Form (English and Spanish versions). SAMHSA is requesting to add a new data collection instrument titled the Organizer Survey—6 month Follow-up, in which hosts of the Communities Talk events will opt in to provide information on any actions that were taken as result of the Communities Talk event.

Changes

Under the current approval, the Organizer Survey consists of 30 items. Under this revision, the Organizer Survey includes 20 items about the Communities Talk event. The following table provides a summary of the proposed changes to the instrument.

Current question/item	Changes		
Wording change for THM	Changed throughout to 'Communities Talk'. Added Zip Code as a response option (new q2). Question updated and entry field [(fill in)] (new q3), Slight wording change of question; added the words 'non-alcohol-related' (What non-alcohol-related topics); added as a secondary question to new q12.		
q9—Promotion of the event	Dropped 'in the community' from the question and updated the response options (new q8).		

Current question/item	Changes		
q10—Number of event attendees	Provided clarification for physical and virtual attendees (new q9). Slight wording change of question; added the words 'alcohol-related' (following alcohol-related topics); response options updated (new q13).		
q14—Use of materials from www.stopalcoholabuse.gov	Updated Web site address (new q17). Updated question and response options (new q15). Question deleted.		
q20/q21—Viewing of online training and identification of that training q22—Utility of training to organization's prevention work	Question deleted. Updated lead-in to statements; updated wording to be properly aligned with the training and technical assistance performance measures for science and service activities (changed from my organization's [to] your organization's) (new q18).		
q23—Improved capacity due to the training received	Updated wording to be properly aligned with the training and technical assistance performance measures for science and service activities (added the word 'that' to training that I received) (new q18).		
q24/q25—Technical assistance (TA) received and how submitted request for TA.	Question deleted.		
q26—Utility of TA to organization's prevention work	Updated lead-in to statements; wording to be properly aligned with the training and technical assistance performance measures for science and service activities (changed from my organization's [to] your organization's) (new g18).		
q27—Improved capacity due to the TA received	Updated wording to be properly aligned with the training and technical assistance performance measures for science and service activities (added the word 'that' to TA that I received) (new q18).		
q28—Share additional information about eventq29/q30—Data collected about event and sharing of data with SAMHSA, including information on where to send the data.	Removed the word 'us' (share with any other) (new q19). Updated questions and mailing information (new q20 and secondary question to new q20).		

Three new questions were added pertaining to what influenced the decision to host an event (new q5), perception of how important UAD and its consequences is to the community (new q14), and agreement with mobilization actions statements (new q16).

The revisions were necessary to better align the data gathered to the short-term and long-term outcomes of the Communities Talk for event hosts, specifically—

Short-Term

- · Increase utility of training
- Increase utility of technical assistance

Long-Term

- Increase national conversations about UAD
- Increase youth involvement in UAD
- Increase community mobilization for UAD prevention
- Increase organization capacity for prevention

• Increase use of evidence-based approaches to UAD prevention

Changes were also made to the Participant Form. Under the current approval, the Participant Form consists of 14 items. Under this revision, the Participant Form includes 17 items about the Communities Talk event. The following table provides a summary of the proposed changes to the instrument, in English and Spanish.

Current question/item	Changes
Wording change for THM q2—Location of event q3—Most important UAD issues facing community q5—Learn anything about UAD and its associated problems before attending the event. q7—Sharing of materials or lessons learned from the event q9—How will become more involved in decreasing UAD in community q10—Gender q13—Race	Changed throughout to 'Communities Talk'. Added Zip Code as a response option (new q2). Question wording change and response options updated (new q3). Slight wording change of question, added the word 'new' (learn anything new) (new q5). Response options updated (new q8). Question wording change and response options updated (new q11). Updated to say 'sex' (new q13). Updated order of response options (new q16).

Three new questions were added surrounding how often respondents are involved in UAD prevention in the community (new q9), likelihood will become more involved in UAD prevention in the community (new q10), and agreement with mobilization actions statements (new q12).

The revisions were necessary to better align the data gathered to the short-term and long-term outcomes of the Communities Talk, specifically—

Short-Term

- Increase knowledge of UAD prevention
- Increase intentions to share information on UAD prevention

Long-Term

- Increase national conversations about UAD
- Increase youth involvement in UAD
- Increase community mobilization for UAD prevention

CBOs that opt in to be contacted 6 months after completing the Organizer

Survey for SAMHSA to follow up on any actions that were taken as a result of the Communities Talk event in their community will be provided with the Organizer Survey—6 month Follow-up. This survey will allow SAMHSA to measure progress towards the short- and long-term outcomes of the Communities Talk, specifically—

Short-Term

- Increase utility of training
- Increase utility of technical assistance

Long-Term

- Increase national conversations about UAD
- Increase youth involvement in UAD prevention
- Încrease community mobilization for UAD prevention
- Increase capacity for prevention organizers
- Increase use of evidence-based approaches to UAD prevention

The Organizer Survey—6 month Follow-up consists of 13 items and captures information on—

- Where the Communities Talk event was held;
- Awareness of UAD activities that have taken place as a result of the event;
- Community mobilization and collaboration efforts;
- Perception of the importance of UAD and its consequences to the community; and
- Increase in youth involvement in UAD prevention activities in the community.

SAMHSA supports nationwide Communities Talk events every other year. Collecting data on each round of Communities Talk events, and using this information to inform policy and measure impact, supports SAMHSA's strategic initiative number 1: Prevention of substance use and mental illness. A specific goal under this initiative is to prevent or reduce the consequences of UAD and adult problem drinking; a specific objective is to establish the prevention of UAD as a priority issue for states, territories, tribal entities, colleges and universities, and communities.

SAMHSA will use the information collected to document the implementation efforts of this nationwide initiative, determine if the federally sponsored Communities Talk events lead to additional activities within the community that are aimed at preventing and reducing UAD, identify what these activities may possibly include, and help plan for future rounds of Communities Talk events. SAMHSA intends to post online a summary document of each round of Communities Talk events and present findings at national conferences attended by CBOs that have hosted these events and might host future events. Similarly, SAMHSA plans to share findings with the Interagency Coordinating Committee on the Prevention of Underage Drinking. Agencies within this committee encourage their grantees to participate as the event hosts.

Additionally, the information collected will support performance measurement for SAMHSA programs under the Government Performance Results Act (GPRA).

Data Collection Component

SAMHSA/CSAP will use a web-based method to collect data through the

Organizer Survey and Organizer Survey—6 month Follow-up, and a paper-and-pencil approach to collect data through the Participant Form. The web-based application will comply with the requirements of Section 508 of the Rehabilitation Act to permit accessibility to people with disabilities.

Every 2 years, the Organizer Survey will be completed by an estimated 500 Communities Talk event organizers and will require only one response per respondent. It will take an average of 10 minutes (0.167 hours) to review the instructions and complete the survey. Similarly, the Organizer Survey—6 month Follow-up will be completed by an estimated 500 Communities Talk event organizers and will require only one response per respondent. It will take an average of 15 minutes (0.25 hours) to review the instructions and complete the survey. This burden estimate is based on comments from three 2016 Communities Talk event hosts who reviewed the survey and provided comments on how long it would take them to complete it.

The Participant Form will be completed by an average of 30 participants per sampled community-based organization (n=400) and will require only one response per respondent. It will take an average of 5 minutes (0.083 hours) to review the instructions and complete the form.

ESTIMATED ANNUALIZED BURDEN TABLE

Form name	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Organizer survey	500 500 4,500	1 1 1	500 500 4,500	0.167 0.25 0.083	83.50 125.00 373.50
Total	5,500		5,500		582.00

Written comments and recommendations concerning the proposed information collection should be sent by February 17, 2017 to the SAMHSA Desk Officer at the Office of Information and Regulatory Affairs, Office of Management and Budget (OMB). To ensure timely receipt of comments, and to avoid potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, commenters are encouraged to submit their comments to OMB via email to: OIRA Submission@omb.eop.gov. Although commenters are encouraged to send their comments via email, commenters may also fax their comments to: 202-395-7285. Commenters may also mail them to:

Office of Management and Budget, Office of Information and Regulatory Affairs, New Executive Office Building, Room 10102, Washington, DC 20503.

Summer King,

Statistician.

[FR Doc. 2017–00980 Filed 1–17–17; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HOMELAND SECURITY

U.S. Citizenship and Immigration Services

[OMB Control Number 1615-0037]

Agency Information Collection Activities: Refugee/Asylee Relative Petition, Form I–730; Extension, Without Change, of a Currently Approved Collection

AGENCY: U.S. Citizenship and Immigration Services, Department of Homeland Security.

ACTION: 60-day notice.

SUMMARY: The Department of Homeland Security (DHS), U.S. Citizenship and