

Numbering System (DUNS) number when applying for Federal grants or cooperative agreements on or after October 1, 2003. It is entered on the SF 424. It is a unique, nine-digit identification number, which provides unique identifiers of single business entities. The DUNS number is free and easy to obtain. Organizations can receive a DUNS number at no cost by calling the dedicated toll-free DUNS Number request line at 1-866-705-5711 or by using this link: https://www.whitehouse.gov/omb/grants/duns_num_guide.pdf.

4. Intergovernmental Review

Executive Order 12372, Intergovernmental Review of Federal Programs, is not applicable to these grant applications.

IV. Application and Submission Information

All applicants are required to submit electronically through <http://www.grants.gov> by midnight July 19, 2006. Exceptions to this requirement may only be made by the AoA grants management officer, Stephen Daniels on (202) 357-3464. Exceptions may only be made to allow for catastrophic events such as tornadoes, floods, etc. Applicants are responsible for mailing or hand delivering applications to AoA in sufficient time to be received by 5:30 PM Eastern Time July 19, 2006.

Please note AoA is requiring applications for this announcement to be submitted electronically through www.grants.gov. The Grants.gov registration process can take several days. If your organization is not currently registered with www.grants.gov, please begin this process immediately. For assistance with www.grants.gov, please contact Arthur Miller at AoA's Grants.gov helpdesk at (202)357-3438. At www.grants.gov, you will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application via the Grants.gov website.

Applicants unable to submit their application via www.grants.gov may request permission to submit a hard copy from AoA Grants Management Officer, Stephen Daniels, (202) 357-3464, Stephen.Daniels@aoa.hhs.gov.

1. Address for Application Submission

Hard copy submissions for which approval has been requested and received (per section IV(6) of the announcement), may be mailed to the U.S. Department of Health and Human Services, Administration on Aging, Office of Grants Management,

Washington, DC 20201, attn: Stephen Daniels HHS-2006-AoA-SM-0608), or hand-delivered (in person, via messenger) to the U.S. Department of Health and Human Services, Administration on Aging, Office of Grants Management, One Massachusetts Avenue, NW., Room 4604, Washington, DC 20001, attn: Stephen Daniels (HHS-2006-AoA-SM-0608).

Applications not submitted electronically must include one original and two copies of the application. Please include a stamped self addressed postcard for acknowledgement of receipt. Instructions for electronic mailing of grant applications are available at <http://www.grants.gov/>.

2. Submission Dates and Times

To receive consideration, applications must be received by the deadline listed in the "Dates" section of this Notice.

V. Responsiveness Criteria

Each application submitted will be screened to determine whether it was received by the closing date and time. Applications received by the closing date and time will be screened for completeness and conformity with the requirements outlined in Sections III and IV of this Notice and the Program Announcement. Only complete applications that meet these requirements will be reviewed and evaluated competitively.

VI. Application Review Information

Eligible applications in response to this announcement will be reviewed according to the following evaluation criteria: Purpose and Need for Assistance (20 points); Approach, Work Plan and Activities (30 points); Project Outcomes, Evaluation and Dissemination (30 points); and Level of Effort (20 points).

VII. Agency Contacts

Direct inquiries regarding programmatic and grant issues to:

Project Officer

U.S. Department of Health and Human Services, Administration on Aging, Washington, DC 20201, Attn: Barbara Lewis, Telephone: (202) 357-3532, e-mail: Barbara.Lewis@aoa.hhs.gov.

Grants Management Specialist

U.S. Department of Health and Human Services, Administration on Aging, Washington, DC 20201, Attn: Stephen Daniels, Telephone: (202) 357-3464, e-mail: Stephen.Daniels@aoa.hhs.gov.

Dated: May 24, 2006.

Josefina G. Carbonell,

Assistant Secretary for Aging.

[FR Doc. E6-8365 Filed 5-30-06; 8:45 am]

BILLING CODE 4154-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Availability of Funding Opportunity Announcement

Funding Opportunity Title/Program Name: Model Approaches to Statewide Legal Assistance Systems.

Announcement Type: Initial.

Funding Opportunity Number: HHS-2006-AoA-SL-0609.

Statutory Authority: Title IV of the Older Americans Act, Public Law 106-501.

Catalog of Federal Domestic Assistance (CFDA) Number: 93.048.

Dates: The deadline date for the receipt of applications is July 24, 2006.

I. Funding Opportunity Description

This announcement seeks proposals from eligible states (as defined in Section III below) to develop model systems for incorporating low-cost legal assistance mechanisms into the statewide legal services development and delivery program. A detailed description of the funding opportunity, including the program objectives and application materials, may be obtained at <http://www.aoa.gov/doingbus/fundopp/fundopp.asp> or <http://www.grants.gov>.

II. Award Information

1. Funding Instrument Type

Cooperative Agreement. The award is a cooperative agreement because the Administration on Aging (AoA) will be substantially involved in the development and execution of the activities of the projects. The cooperative agreement will describe the technical assistance and support to be provided by the AoA project officer. The cooperative agreement will also specify project performance criteria and measures relative to the 2006 AoA Legal Assistance Program goal and objectives. The AoA project officer for these new cooperative agreements will provide technical assistance and support on grant management and implementation issues, including execution of the cooperative agreement.

The grantees and the AoA will work cooperatively to determine the priority activities to be completed by the project and develop the work plan for each year

of the project. Within 45 days of the award and 45 days of each continuation award, the grantee will agree upon and adhere to a work plan that details expectations for major activities, products, and reports during the current budget period. The work plan will include a timetable for project and activity implementation, staff assignments, and other areas that require AoA consultation, review, and/or prior approval. Either the AoA or the project can propose a revision of the final work plan at any time.

The AoA will define project performance criteria and expectations, and will monitor, evaluate, and support the projects' efforts in achieving performance goals through mentoring, listserv communications, and other technical support. The AoA will assist the project leadership in understanding the strategic goals and objectives, policy perspectives, and priorities of the Assistant Secretary for Aging and the Department of Health and Human Services by sharing such information via e-mail, conference calls, briefings and other consultations. The AoA will also share information with the project about other federally sponsored projects and activities relevant to the interests of the AoA Legal Assistance Program.

2. Anticipated Total Priority Area Funding per Budget Period

The AoA intends to make available, under this program announcement, grant awards for up to four (4) cooperative agreements at a federal share of approximately \$100,000 per year for a project period of up to three (3) years, contingent upon the availability of Federal funds. Grantees are required to cover 25% of the total cost of the project from non-Federal cash or in-kind assistance.

III. Eligibility Criteria and Other Requirements

1. Eligible Applicants

Awards will be made to the agency within each eligible state that currently houses (or proposes to house) the Legal Services Developer. This agency must partner with an entity experienced in providing legal services to older persons within that state through a low-cost service delivery mechanism, such as the senior legal helpline model, funded by AoA under the Title IV Legal Assistance Grants Program.

Eligible states include all those not currently receiving AoA Title IV Legal Assistance Grants initially awarded in 2005 (Connecticut, Florida, Michigan, Nebraska, New York, Pennsylvania, and Vermont). This is in keeping with AoA's

goal of maximizing the number of states utilizing low-cost legal assistance mechanisms as part of their statewide legal services development and delivery program.

2. Cost Sharing or Matching

Grantees are required to provide at least 25 percent of the total program costs from non-Federal cash or in-kind resources in order to be considered for the award.

3. DUNS Number

The Office of Management and Budget requires applicants to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements on or after October 1, 2003. It is entered on the SF 424. It is a unique, nine-digit identification number, which provides unique identifiers of single business entities. The DUNS number is *free and easy* to obtain.

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VII. Agency Contacts

Direct inquiries regarding programmatic and grant issues to:
Project Officer: U.S. Department of Health and Human Services, Administration on Aging, Washington, DC 20201, Attn: Valerie Soroka. Telephone: (202) 357-3531, e-mail: Valerie.Soroka@aoa.hhs.gov.

Grants Management Specialist: U.S. Department of Health and Human Services, Administration on Aging, Washington, DC 20201, Attn: Stephen Daniels. Telephone: (202) 357-3464, e-mail: Stephen.Daniels@aoa.hhs.gov.

Dated: May 24, 2006.

Josefina G. Carbonell,

Assistant Secretary for Aging.

[FR Doc. E6-8364 Filed 5-30-06; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Solicitation for Nominations for New Primary and Secondary Public Health Topics To Be Considered for Review by the Task Force on Community Preventive Services

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Solicit for new topic nominations.

SUMMARY: The Centers for Disease Control and Prevention (CDC) invites individuals and organizations to nominate public health topic areas or related population-oriented interventions (i.e., interventions delivered to groups of people in communities or healthcare systems) for the Task Force on Community Preventive Services (Task Force) to consider for review. Topics that have been recently reviewed by the Task Force or are currently under review are listed below in the **SUPPLEMENTARY INFORMATION** section.

The Task Force is an independent panel of experts that makes evidence-based recommendations regarding use of population-based interventions, which are selected from broad topic areas. Recommendations are based on the evidence gathered in rigorous and systematic scientific reviews of published studies conducted by Guide to Community Preventive Services (Community Guide) scientific teams. The findings from reviews are published in peer-reviewed journals and made available through the Community Guide

Web site (<http://thecommunityguide.org>). Community Guide topics coordinate with Healthy People 2010 objectives; address topics related to the large preventable burden of disease; provide guidance on ways to reduce disease, injury, and impairment; and address social challenges.

Topics can be nominated by individuals or organizations. The Task Force will consider nominations and prioritize topics for review using the following criteria: Public health importance (burden of disease, injury, impairment, or exposure); preventability (amount of burden that could realistically be reduced given adequate resources); relationship to other public health initiatives; and usefulness of the package of topics selected and level of current research and intervention activity in the public and private sectors. The Task Force will also prioritize topics for which there are gaps in the evidence and the potential to significantly improve public health decisionmaking. Nominations can be for new topics or topics previously reviewed by the Task Force.

Basic Topic Nomination

Requirements: Nominations must be no more than 250 words long and must include the following information. (A separate appendix, not included in the word count, can contain references and supporting documents.)

1. Name of topic or intervention.
2. Rationale for consideration by the Task Force, to include as appropriate:
 - a. Justification that topic area addresses risk behaviors related to the largest burden of disease; provides guidance on ways to reduce disease, injury, and impairment; or addresses environmental and social challenges.
 - b. Description of public health importance (burden of disease, injury, impairment, or exposure). Citations and supporting documents are recommended.
 - c. Public health relevance (amount of burden that could realistically be reduced given adequate resources).
 - d. Summary of new evidence, if any, that has potential to affect the Task Force's recommendation on a previously reviewed topic. Please refer to <http://thecommunityguide.org> for current Task Force recommendations. Citations and supporting documents are recommended.
 - e. In topic areas that have already been addressed or identified as high priority by the Task Force, important interventions that have not yet been addressed or where additional new information may lead to updated conclusions can be identified. Please refer to <http://thecommunityguide.org>

for existing Task Force recommendations. Citations and supporting documents are recommended.

DATES: Topic nominations should be submitted by June 23, 2006, to be considered for 2006–2008. CDC will not reply to submissions but will consider all topic nominations during the selection process. If a topic is selected for review by the Task Force, the nominator will be notified by CDC.

ADDRESSES: Please submit nominations to: Detrice Sherman, MPH, ATTN: Task Force Topic Nominations, National Center for Health Marketing, Community Guide, Centers for Disease Control and Prevention, 4770 Buford Highway, MS K-95, Atlanta, GA 30341, Fax: 404-498-0979, E-mail: dsherman@cdc.gov. For further information please contact: Detrice Sherman at dsherman@cdc.gov or Peter Briss at pbriss@cdc.gov.

SUPPLEMENTARY INFORMATION:

Background

The scientific literature on specific health problems can be large, inconsistent, uneven in quality, or inaccessible. Through rigorous and systematic scientific reviews of published studies, the Guide to Community Preventive Services (Community Guide) serves as a filter for this information—using systematic review methods to summarize what is known about the effectiveness, economic efficiency, and feasibility of interventions to promote community health and prevent disease. The Task Force on Community Preventive Services makes recommendations for the use of various interventions based on the evidence gathered in these reviews. The findings from the reviews are published in peer-reviewed journals and also made available on the Internet at <http://www.thecommunityguide.org>.

The Task Force is an independent panel of experts that makes evidence-based recommendations regarding population-based interventions. The group was convened in 1996 by the Department of Health and Human Services to provide leadership in the evaluation of community, population, and healthcare system strategies to address a variety of public health and health promotion topics such as physical activity. The Task Force's membership is multi-disciplinary, and includes perspectives representative of state and local health departments, managed care, academia, behavioral and social sciences, communications sciences, mental health, epidemiology, quantitative policy analysis, decision