assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The application also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act. Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than July 31, 1998.

A. Federal Reserve Bank of Atlanta (Lois Berthaume, Vice President) 104 Marietta Street, N.W., Atlanta, Georgia 30303-2713:

1. First American Corporation, Nashville, Tennessee; to merge with CSB Financial Corporation, Ashland City, Tennessee, and thereby indirectly acquire Cheatham State Bank, Kingston Springs, Tennessee.

Board of Governors of the Federal Reserve System, July 2, 1998.

# Robert deV. Frierson,

Associate Secretary of the Board. [FR Doc. 98–18092 Filed 7–7–98; 8:45 am] BILLING CODE 6210–01–F

### FEDERAL RESERVE SYSTEM

## Notice of Proposals to Engage in Permissible Nonbanking Activities or to Acquire Companies that are Engaged in Permissible Nonbanking Activities

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y, (12 CFR Part 225) to engage *de novo*, or to acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for

bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than July 22, 1998.

A. Federal Reserve Bank of Atlanta (Lois Berthaume, Vice President) 104 Marietta Street, N.W., Atlanta, Georgia 30303-2713:

1. The Colonial BancGroup, Inc., Montgomery, Alabama; to acquire ProImage, Inc., Macon, Georgia, and thereby engage in data processing activities, pursuant to § 225.28(b)(14) of Regulation Y.

Board of Governors of the Federal Reserve System, July 2, 1998.

#### Robert deV. Frierson,

Associate Secretary of the Board. [FR Doc. 98–18093 Filed 7–7–98; 8:45 am] BILLING CODE 6210–01–F

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[Announcement Number 99003]

Applied Research Program in Emerging Infections Investigations of Infectious Causes of Chronic Diseases; Notice of Availability of Funds for Fiscal Year 1999

#### Introduction

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1999 funds for competitive grants and/or cooperative agreements to support applied research on emerging infections. This announcement specifically addresses infectious causes of chronic diseases.

CDC is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority area of Immunization and Infectious Diseases. (For ordering a copy of Healthy People

2000, see the section Where to Obtain Additional Information.)

#### **Authority**

This program is authorized under sections 301(a) and 317(k)(2) of the Public Health Service Act, as amended [42 U.S.C. 241(a) and 247b(k)(2)].

## **Smoke-Free Workplace**

CDC 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's 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.

### **Eligible Applicants**

Applications may be submitted by public and private nonprofit organizations and governments and their agencies. Thus, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, including State and local governments or their bona fide agents, federally recognized Indian tribal governments, Indian tribes or Indian tribal organizations are eligible to apply.

**Note:** Only one application will be accepted from any single applicant, organization, government, or agency.

## **Availability of Funds**

Approximately \$500,000 is available in FY 1999 to fund one to three awards. It is expected that the average award will be \$500,000, ranging from \$100,000 to \$500,000. It is expected the award(s) will begin on or about March 1, 1999, and will be made for a 12-month budget period within a project period of up to three years. (These funding amounts are for the first 12-month budget period and include both direct and indirect costs.)

Funding estimates may vary and are subject to change.

Continuation awards within an approved project period will be made on the basis of satisfactory progress and availability of funds.

Determination of Which Instrument to

Applicants must specify the type of award for which they are applying, either grant or cooperative agreement. CDC will review the applications in accordance with the evaluation criteria. Before issuing awards, CDC will determine whether a grant or cooperative agreement is the appropriate instrument based upon the need for substantial CDC involvement in the project.

To assist applicants in making a determination as to which type of award to apply for, the following information is provided:

#### 1. Grants

A research project grant is one in which substantial programmatic involvement by CDC is not anticipated by the recipient during the project period. Applicants for grants must demonstrate an ability to conduct the proposed research with minimal assistance, other than financial support, from CDC. This would include possessing sufficient resources for clinical, laboratory, and data management services and a level of scientific expertise to achieve the objectives described in their research proposal without substantial technical assistance from CDC.

### 2. Cooperative Agreements

A research project cooperative agreement is one in which CDC will assist recipients in conducting the proposed research. The application should be presented in a manner that demonstrates the applicant's ability to address the research problem in a collaborative manner with CDC.

# **Use of Funds**

## Restrictions on Lobbying

Applicants should be aware of restrictions on the use of HHS funds for lobbying of Federal or State legislative bodies. Under the provisions of 31 U.S.C. section 1352 (which has been in effect since December 23, 1989), recipients (and their subtier contractors) are prohibited from using appropriated Federal funds (other than profits from a Federal contract) for lobbying Congress or any Federal agency in connection with the award of a particular contract, grant, cooperative agreement, or loan. This includes grants/cooperative agreements that, in whole or in part, involve conferences for which Federal funds cannot be used directly or indirectly to encourage participants to lobby or to instruct participants on how to lobby.

In addition, the FY 1998 Department of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act (Public Law 105–78) states in sections 503(a) and (b) that no part of any appropriation contained in this Act shall be used, other than for normal and recognized executive-legislative relations, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, radio, television, or video presentation

designed to support or defeat legislation pending before the Congress or any State legislature, except in presentation to the Congress or any State legislature itself. No part of any appropriation contained in this Act shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence legislation or appropriations pending before the Congress or any State legislature.

### **Background**

In the United States (U.S.) and elsewhere, infectious diseases continue to threaten public health and contribute to the escalating costs of health care. While infectious diseases remain the leading cause of death in developing countries, the burden of illness and death due to chronic medical conditions has surpassed the role of infectious diseases in most industrialized countries. However, an increasing body of evidence now suggests that infectious agents play critical roles in several chronic diseases, including major problems such as cancer, heart disease, and diabetes mellitus. The emerging role of micro-organisms as etiologies for chronic diseases has important implications for therapy, prevention, and pathogenesis, and this topic merits research efforts designed with the public health implications of these new associations kept in mind.

Over the past decade, causative roles have been proposed or established for infectious agents in conditions as diverse as: duodenal ulcers and gastric cancer; juvenile onset diabetes mellitus; atherosclerosis; Kaposi's sarcoma; Guillain-Barre syndrome; Crohn's disease; cerebral palsy; preterm low birth weight, and infertility. The burden of evidence supporting some of these associations has been sufficient to introduce intervention trials (e.g., Chlamydia pneumoniae and atherosclerosis) and even consensus treatment standards (e.g., Helicobacter pylori and peptic ulcer disease), while other associations remain speculative at present. The fraction of a given chronic disease which can be attributed to specific infectious agents is unknown for the majority of conditions for which an association is now considered likely. Further, although several specific infections are now recognized causes of pre-term low birth weight, the proportion of infants born prematurely as a result of infectious diseases is not known, nor is the proportion of these occurrences which can be prevented through appropriate screening and treatment of infections prenatally.

CDC has developed a plan for revitalizing the nation's ability to identify, contain, and prevent illness from emerging infectious diseases (Addressing Emerging Infectious Diseases Threats: A Prevention Strategy for the U.S). The plan includes applied research as a major objective, stressing the importance of integrating laboratory science and epidemiology to optimize public health practice in the U.S. CDC has developed an Extramural Applied Research Program in Emerging Infections (EĂRP) designed to fill gaps in existing support for research in emerging infectious disease surveillance, epidemiology, and prevention. This announcement specifically addresses investigations of infectious causes of chronic diseases and solicits applications in this area.

For additional reading on this topic, the following article is recommended: Lorber B. Are All Diseases Infectious? Ann Intern Med 1996;125:844–851.

### **Purpose**

The purpose of the EARP is to provide financial and technical assistance for applied research projects on emerging infections in the U.S. As a component of EARP, the purpose of this grant/cooperative agreement announcement is to provide assistance for one or more projects addressing infectious causes of chronic diseases.

The objective is to address potential associations between one or more infectious agents and a chronic disease syndrome by conducting an investigation which either: (a) evaluates a suspected relation between a specific infectious agent and a chronic disease syndrome; (b) designs and tests an intervention strategy aimed at the infection as a means of reducing chronic disease sequelae; or (c) determines the health burden of a chronic disease attributable to the infectious agent. Note that in addition to the standard chronic disease syndromes such as cancer, heart disease, diabetes, etc., syndromes that may be addressed under this announcement include preterm low birth weight and infertility.

# **Program Requirements**

In conducting activities to achieve the purpose of this program, the recipient will be responsible for the activities under A. (Recipient Activities), and CDC will be responsible for conducting activities under B. (CDC Activities) under cooperative agreements:

#### A. Recipient Activities

1. Develop a research protocol to conduct one or more of the following studies:

- a. Evaluate a suspected association between one or more infections and a chronic disease syndrome.
- b. Develop, implement, and evaluate a prevention strategy for reducing a chronic disease by addressing the associated infectious agent.
- c. Determine the health burden of a chronic disease attributable to an associated infectious agent.
- 2. Conduct the proposed study using a pilot phase, where appropriate, to identify potential problems and make modifications to the research protocol.
- 3. Publish and/or otherwise disseminate results of the project.

# B. CDC Activities (Cooperative Agreements)

- 1. Provide technical assistance in the design and conduct of the research.
- 2. Perform selected laboratory tests, as appropriate and necessary.
- 3. Participate in data management, the analysis of research data, and the interpretation and presentation of research findings.
- 4. Provide biological materials (e.g., strains, reagents, etc.) as necessary for studies.

# **Technical Reporting Requirements**

Narrative progress reports are required semiannually. The first semiannual report is required with the second year's noncompeting continuation application and should cover program activities from the date of award for reporting in the first year of the project. The second semiannual report is due 90 days after the end of each budget period and should cover activities from the date of previous report. Progress reports should summarize tasks completed, problems encountered, and plans for continued research activities. Reports should also include copies of any publications resulting from the project.

An original and two copies of a Financial Status Report (FSR) are required no later than 90 days after the end of each budget period.

A final performance report and FSR are due no later than 90 days after the end of the project period. All reports are to be submitted to the Grants Management Branch, CDC.

#### **Application**

#### 1. Pre-application Letter-of-Intent

In order to enable CDC to plan and review applications submitted under this Program Announcement, all parties intending to submit applications are requested to inform CDC of their intention to do so as soon as possible but not later than 30 business days prior

to the application due date. Notification should include: (1) this program Announcement Number 99003, (2) name and address of institution, and (3) name, address, and telephone number of contact person. Notification can be provided by facsimile, postal mail, or electronic mail (E-mail) to Anne Schuchat, M.D., National Center for Infectious Diseases, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Mailstop C–23, Atlanta, GA 30333, Facsimile (404) 639–3970, Internet acs1@cdc.gov.

## 2. Application Content

Applicants are strongly encouraged to develop applications in accordance with PHS Form 398 (Revised 5/95, OMB Control Number 0925–0001) information contained in this grant/cooperative agreement announcement and the instructions outlined below. In order to ensure an objective, impartial, and prompt review, applications must conform to these instructions.

The original and five (5) complete copies of the application must be UNSTAPLED and UNBOUND. ALL pages must be clearly numbered, and a complete index to the application and its appendices must be included. All typewritten materials must be single-spaced, using a font no smaller than size 12. All supplemental pages of the application (i.e., in addition to the 398 forms) must be on the 8½" by 11" white paper. All pages must be printed on ONE side only, with at least 1" margins, headers, and footers.

The application narrative must not exceed 12 pages (excluding budget and appendices). Unless indicated otherwise, all information requested below must appear in the narrative. Materials or information that should be part of the narrative will not be accepted if placed in the appendices. The application narrative must contain the following sections in the order presented below:

#### a. Abstract

Provide a brief (two pages maximum) abstract of the project. Clearly identify the project period proposed (not to exceed maximum of 3 years as indicated in Availability of Funds section). Clearly identify the type of award that is being applied for, grant or cooperative agreement.

## b. Background and Need

Discuss the background and need for the proposed project. Demonstrate a clear understanding of the purpose and objectives of this program announcement. Discuss and demonstrate how the proposed project addresses an important gap which is of public health importance.

#### c. Capacity and Personnel

Describe applicant's past experience in conducting activities similar to that being proposed. Describe applicant's resources, facilities, and professional personnel that will be involved in conducting the project. Include in an appendix curriculum vitae for all professional personnel involved with the project. Describe plans for administration of the project and identify administrative resources/ personnel that will be assigned to the project. Clearly identify specific assigned responsibilities for all key professional personnel. Provide in an appendix letters of support from all key participating non-applicant organizations, individuals, etc. (if any), which clearly indicate their commitment to participate as described in the operational plan. (Do not include letters of support from CDC personnel they will not be accepted.)

#### d. Objectives and Technical Approach

Present specific objectives for the proposed research which are measurable and time-phased and are consistent with the Purpose and Recipient Activities of this announcement. Present a detailed operational plan for initiating and conducting the research which clearly and appropriately addresses these objectives (if proposing a multi-year project, provide a detailed description of first-year activities and a brief overview of subsequent-year activities). Include a clear description of applicant's technical approach/methods which are directly relevant to the above objectives. Describe specific study protocols or plans for the development of study protocols. Describe the nature and extent of collaboration with CDC (if proposing a cooperative agreement) and/or others during various phases of the research. Describe in detail a plan for evaluating progress toward achieving process and outcome project objectives. If the project will employ a particular research subject population, describe characteristics of the patient population and how research in this subject group will yield generalizable information. Describe contingency plans which acknowledge how the research will address likely obstacles and assure that the proposed task(s) can still be completed. Include sample size calculations where appropriate to assure that measurable objectives can be evaluated.

### e. Budget

Provide a line-item budget and accompanying detailed, line-by-line justification for the first year of the project that demonstrates the request is consistent with the purpose and objectives of this program. If requesting a multi-year project, provide estimated total budget (direct plus indirect) for subsequent years. If requesting funds for any contracts, provide the following information for each proposed contract: (1) Name of proposed contractor, (2) breakdown and justification for estimated costs, (3) description and scope of activities to be performed by contractor, (4) period of performance, and (5) method of contractor selection (e.g., sole-source or competitive solicitation).

# f. Human Subjects

Whether or not exempt from DHHS regulations, if the proposed project involves human subjects, describe in an appendix adequate procedures for the protection of human subjects. Also, ensure that women, racial and ethnic minority populations are appropriately represented in applications for research involving human subjects.

#### **Evaluation Criteria**

The applications will be reviewed and evaluated according to the following criteria:

# 1. Background and Need (15 Points)

Extent to which applicant demonstrates a clear understanding of the background, purpose, and objectives of the project and the extent to which the proposed project addresses an area of public health importance not adequately addressed in ongoing programs.

# 2. Capacity (30 Points)

Extent to which applicant describes adequate resources and facilities (both technical and administrative) for conducting the project. Extent to which applicant documents that professional personnel involved in the project are qualified and have past experience and achievements in research related to that proposed as evidenced by curriculum vitae, publications, etc. If applicable, extent to which applicant includes letters of support from non-applicant organizations, individuals, etc., and the extent to which such letters clearly indicate the author's commitment to participate as described in the operational plan. If the proposed project includes evaluation of health conditions in a defined population, the extent to which generalizations from this

particular study population to broader populations can be made.

# 3. Objectives and Technical Approach (55 Points Total)

- a. Extent to which applicant describes objectives of the proposed research which are consistent with the purpose of this announcement and which are measurable and time-phased. (15 points)
- b. Extent to which applicant presents a detailed operational plan for initiating and conducting the research which clearly and appropriately addresses all Recipient Activities. Extent to which the plan clearly describes applicant's technical approach/methods for conducting the proposed research and extent to which the approach/methods are appropriate and adequate to accomplish the objectives. Extent to which applicant describes specific study protocols or plans for the development of study protocols that are appropriate for achieving project objectives. Extent to which applicant describes adequate and appropriate collaboration with CDC (if proposing a cooperative agreement) and/or others during various phases of the project. If the proposed project involves human subjects, whether or not exempt from HHS regulations, the extent to which adequate procedures are described for the protection of human subjects, and extent to which protections appear adequate that women, racial and ethnic minority populations are appropriately represented in applications involving human research. (35 points)
- c. Extent to which applicant provides a detailed and adequate plan for evaluating progress toward achieving project process and outcome objectives. (5 points)

#### 4. Budget (Not Scored)

Extent to which the proposed budget is reasonable, clearly justifiable, and consistent with the intended use of grant/cooperative agreement funds.

#### **Executive Order 12372 Review**

This program is not subject to Executive Order 12372 Review.

# **Public Health System Reporting Requirements**

This program is not subject to the Public Health System Reporting Requirements.

#### **Catalog of Federal Domestic Assistance Number**

The Catalog of Federal Domestic Assistance Number is 93.283.

Other Requirements

Paperwork Reduction Act

Projects that involve the collection of information from ten or more individuals and funded by the grant/cooperative agreement will be subject to review and approval by the Office of Management and Budget (OMB) under the Paperwork Reduction Act.

## Human Subjects

If the proposed project involves research on human subjects, the applicant must comply with the Department of Health and Human Services Regulations (45 CFR Part 46) regarding the protection of human subjects. Assurance must be provided to demonstrate that the project will be subject to initial and continuing review by an appropriate institutional review committee. The applicant will be responsible for providing evidence of this assurance in accordance with the appropriate guidelines and form provided in the application kit.

In addition to other applicable committees, Indian Health Service (IHS) institutional review committees also must review the project if any component of IHS will be involved or will support the research. If the Native American community is involved, its Tribal government must also approve that portion of the project applicable to it.

# Women, Racial and Ethnic Minorities

It is the policy of the CDC and the Agency for Toxic Substances and Disease Registry (ATSDR) to ensure that individuals of both sexes and the various racial and ethnic groups will be included in CDC/ATSDR-supported research projects involving human subjects, whenever feasible and appropriate. Racial and ethnic groups are those defined in OMB Directive No. 15 and include American Indian or Alaska Native, Asian, Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander. Applicants shall ensure that women, racial and ethnic minority populations are appropriately represented in applications for research involving human subjects. Where clear and compelling rationale exist that inclusion is inappropriate or not feasible, this situation must be explained as part of the application. This policy does not apply to research studies when the investigator cannot control the race, ethnicity, and/or sex of subjects. Further guidance to this policy is contained in the Federal Register, Vol. 60, No. 179, pages 47947-47951, and dated Friday, September 15, 1995.

#### Animal Subjects

If the proposed project involves research on animal subjects, the applicant must comply with the "PHS Policy on Humane Care and Use of Laboratory Animals by Awardee Institutions." An applicant organization proposing to use vertebrate animals in PHS-supported activities must file an Animal Welfare Assurance with the Office for Protection from Research Risks at the National Institutes of Health.

# **Application Submission and Deadline**

Applicants are strongly encouraged to submit the original and five complete copies of application PHS Form 398 (Revised 5/95, OMB Control Number 0925–0001) to Sharron P. Orum, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 300, Mailstop E–18, Atlanta, GA 30305, on or before October 1, 1998.

- 1. Deadline: Applications shall be considered as meeting the deadline if they are either:
- a. Received on or before the deadline date; or
- b. Sent on or before the deadline date and received in time for submission to the objective review group. (Applicants must 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.)
- 2. Late Applications: Applications which do not meet the criteria in 1.a. or 1.b. above are considered late applications. Late applications will not be considered and will be returned to the applicant.

# Where To Obtain Additional Information

To receive additional written information and to request an application kit, call 1–888–GRANTS (1–888–472–6874). You will be asked to leave your name and address and will be instructed to identify the Announcement number of interest. (Please refer to Announcement Number 99003.) You will receive a complete program description, information on application procedures and application forms.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from Oppie M. Byrd, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 314, Mailstop E–18, Atlanta, GA 30305, telephone (404) 842–6546, Facsimile (404) 842–6513, Internet oxb3@cdc.gov. Programmatic technical assistance may be obtained from Anne Schuchat, M.D., National Center for Infectious Diseases, Division of Bacterial and Mycotic Diseases, Centers for Disease Control and Prevention (CDC), 1600 Clifton Road, NE., Mailstop C–23, Atlanta, GA 30333, telephone (404) 639–4720, Internet acs1@cdc.gov.

Please refer to Announcement Number 99003 when requesting information regarding this program.

You may obtain this announcement from one of two Internet sites on the actual publication date: CDC's Home Page at http://www.cdc.gov or at the Government Printing Office Home Page (including free on-line access to the **Federal Register** at http://

www.access.gpo.gov).
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) referenced in the Introduction through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402–9325, telephone (202) 512–1800.

Dated: July 1, 1998.

#### Joseph R. Carter,

Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98–18018 Filed 7–7–98; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

[Announcement Number 99005]

Applied Research Program in Emerging Infections Correlation of Environmental Monitoring of Microbial Agents With Disease Control; Notice of Availability of Funds for Fiscal Year 1999

#### Introduction

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1999 funds for competitive grants and/or cooperative agreements to support applied research on emerging infections. This announcement specifically addresses the correlation of environmental monitoring of microbial agents with disease control.

CDC is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority area of Immunization and Infectious Diseases. (For ordering a copy of Healthy People 2000, see the section Where to Obtain Additional Information.)

#### **Authority**

This program is authorized under Sections 301(a) and 317(k)(2) of the Public Health Service Act, as amended [42 U.S.C. 241(a) and 247b(k)(2)].

## **Smoke-Free Workplace**

CDC 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's 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.

# **Eligible Applicants**

Applications may be submitted by public and private nonprofit organizations and governments and their agencies. Thus, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, including State and local governments or their bona fide agents are eligible to apply.

**Note:** An organization described in Section 501(c)(4) of the Internal Revenue Code of 1986 which engages in lobbying activities shall not be eligible to receive Federal funds constituting an award, grant, contract, loan, or any other form.

Only one application will be accepted from any single applicant, organization, government, or agency.

## **Availability of Funds**

Approximately \$500,000 is available in FY 1999 to fund one to three awards, ranging from \$100,000 to \$500,000. It is expected the award(s) will begin on or about March 1, 1999, and will be made for a 12-month budget period within a project period of up to three years. (The funding amounts listed above are for the first 12-month budget period and include both direct and indirect costs.) Funding estimates may vary and are subject to change.

Continuation awards within an approved project period will be made on the basis of satisfactory progress and availability of funds.