evaluation, and dissemination of training and professional tools to support the development, adaptation, and translation of new or existing tools and materials and to reduce duplication

among PETS grantees.

Available Funding: It is anticipated that awards for up to four PETS and one **REC Demonstration Cooperative** Agreements will be made in FY 2002 for a total of \$2,000,000 of available funds. HRSA expects that the average PETS award will be approximately \$300,000 to \$400,000 and the average REC award will be approximately \$400,000. It is anticipated that project funding will be for 3 years. After the first year, continuation funding will depend on reasonable progress and the availability of funds. There are no matching requirements for this program.

Eligible Applicants: Funding will be directed to activities designed to deliver services specifically targeting racial and ethnic minority populations affected by HIV/AIDS. Eligible entities may include: not-for-profit community-based organizations, national organizations, colleges and universities, clinics and hospitals, research institutions, State and local government agencies and tribal government and tribal/urban Indian entities and organizations. Faithbased and community-based organizations are eligible to apply.

Authorizing Legislation: The authority for these cooperative agreements is in Section 2692(a) of the Public Health Service Act, as amended, 42 U.S.C. 300ff–111(a). This program is excluded from coverage under Executive Order

12372.

Where to Request and Send Applications: To obtain an application kit: Call the HRSA Grants Application Center at the toll free number, 877-477-2123 and request the OMB Catalogue of Federal Domestic Assistance number (CFDA) 93.145, and cite "Peer Educator Training Sites and Resource and **Evaluation Center Cooperative** Agreements"

To submit the completed kit: Send the original and 2 copies of your grant application to: HRSA Grants Application Center, Attention: HAB Grants Management Officer, 901 Russell Avenue, Suite 450, Gaithersburg, MD 20879. Applications sent to any other address are subject to being returned. **Federal Register** notices are available on the following web site: http:// www.hab.hrsa.gov.

Application Dates: A letter of intent to submit an application is requested by August 21, 2002. Applications for this announced grant must be received in the HRSA Grant Application Center by close of business September 6, 2002.

Applications shall be considered as meeting the deadline if they are (1) received on or before the deadline date or (2) are postmarked on or before the deadline date and received in time for orderly processing and submission to the review committee. Applicants should request a legibly dated receipt from a commercial carrier or U.S. Postal Service postmark. Private metered postmarks will not be accepted as proof of timely mailing. Applications postmarked after the due date will be returned to the applicant.

ADDRESSES: Brief letters of intent are requested for HAB to determine how many will apply. Letters of intent to apply for funding should be faxed, 301-594–2835 or mailed to Elijah Martin, Jr., HIV/AIDS Bureau, Health Resources and Services Administration, 5600 Fishers Lane, Room 7-47, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT:

Additional technical information may be obtained from Elijah Martin, Jr., HAB, HRSA, 5600 Fishers Lane 7–47 Rockville, MD 20857. His telephone number is (301) 443-0802; fax number (301) 594-2835; and e-mail emartin@hrsa.gov. You may also contact Ledia I. Martinez, M.D., Acting Chief, HIV Education Branch, Division of Training and Technical Assistance, HAB, HRSA, 5600 Fishers Lane, Room 7-46, Rockville, MD 20857. Her telephone number is (301) 443-5431 and e-mail *lmartinez@hrsa.gov*.

SUPPLEMENTARY INFORMATION:

Applications will be reviewed by an objective review committee. The review criteria will include: adequacy of needs assessment; adequacy of proposed plan; coordination and collaboration; management plan, staffing, project organization and resources; program documentation, program evaluation, and quality improvement; appropriateness and justification of budget; and adherence to program guidance.

The Secretary shall give preference to qualified projects which will—

(A) Train, or result in the training of, health professionals who will provide treatment for minority individuals with HIV disease and other individuals who are high risk of contracting such disease;

(B) Train, or result in the training of, minority health professionals and minority allied health professionals to provide treatment for individuals with such disease.

As an active partner in this cooperative agreement, HRSA will have significant programmatic involvement with the applicant regarding program

plans, policies and other issues which may have major implications for any activities undertaken by the applicant under the cooperative agreement. HRSA will provide consultation and technical assistance in planning, operating, and evaluating major program activities. HRSA's specific involvement will be to:

 Assist to facilitate collaborations with Ryan White grantees and other HIV community organizations to reach the

target population;

• Participate, as appropriate, in planning and producing any conferences, meetings, or site visits conducted during the period of the project; and

 Attend and participate in advisory, consultant meeting, and other project planning meetings and conference calls.

Paper Reduction Act: Should any of the data collection activities associated with this cooperative agreement fall under the purview of the Paperwork Reduction Act of 1995, OMB clearance will be sought.

Dated: July 22, 2002.

Elizabeth M. Duke,

Administrator.

[FR Doc. 02-19908 Filed 8-6-02; 8:45 am] BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Training and Technical Assistance Program Announcement: American Indian/Alaska Native Technical **Assistance Center**

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of availability of funds.

SUMMARY: The Health Resources and Services Administration (HRSA), HIV/ AIDS Bureau (HAB) announces that applications will be accepted for fiscal year (FY) 2002 for the award of a cooperative agreement to support an American Indian/Alaska Native **Technical Assistance Center** (AIANTAC). The purpose of this cooperative agreement is to provide funding for the operation of a technical assistance center to provide competitive proposal development and implementation services to American Indian/Alaska Natives (AI/AN) in Urban and Tribal programs and in the AI/AN communities to increase their involvement in the competitive proposal process. This center will provide professional staff who will assist participants in the development,

preparation and finalization of written competitive proposals for submission. This one-on-one technical assistance will assist in the linkages among the AI/AN Urban and Tribal health care programs, which will increase their knowledge about HIV/AIDS prevention and treatment, increase their access to care and assist in eliminating health disparities in the AI/AN communities.

Available Funding: It is estimated that up to \$700,000 will be available to support a single recipient. Actual funding levels will depend on the availability of funds. The entire project period will be 2 years. Continuation of awards will be made on the basis of satisfactory progress and the availability of funds.

Eligible Applicants: Eligible applicants are public and nonprofit private entities and schools and academic health sciences centers. Tribal/Native Alaskan organizations and faith-based and community-based organizations are eligible to apply. The applicant must demonstrate significant experience working with the AI/AN communities.

Authorizing Legislation: The authority of this cooperative agreement is Section 2692 of the Public Health Service Act.

Where To Request and Send an Application

To obtain an application kit: Call the HRSA Grants Application Center at 877–477–2123 and request the OMB Catalogue of Federal Domestic Assistance number is 93.145.

To submit the completed kit: Send the original and 2 copies of your grant application to: HRSA Grants
Application Center, Attention: Grants
Management Officer, 901 Russell
Avenue, Suite 450, Gaithersburg, MD
20879.

Application Dates: The deadline for receipt of applications is close of business September 6, 2002.

Applications shall be considered as meeting the deadline if they are either (1) received on or before the due date or (2) postmarked on or before the deadline date.

Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or the U.S. Postal Service. Private metered postmarks will not be accepted as proof of timely mailing. Grant applications postmarked after the deadline date and/or not received in time for the Objective Review Committee will be returned to the applicant.

FOR ADDITIONAL INFORMATION: Additional information may be obtained from Juanita Koziol, MS, NP, CS, RN., Senior

Public Health Analyst, HAB, 5600 Fishers Lane, Parklawn Building, Room 7–47, Rockville, MD 20857, Telephone (301) 443–6068, FAX: (301) 443–6709, e-mail: *jkoziol@hrsa.gov*

SUPPLEMENTARY INFORMATION: The Secretary shall give preference to qualified projects which will—

(A) Train, or result in the training of, health professionals who will provide treatment for minority individuals with HIV disease and other individuals who are at high risk of contracting such disease; and

(B) Train, or result in the training of, minority health professional and minority allied health professionals to provide treatment for individuals with such disease.

As an active partner in this cooperative agreement, HRSA will have significant involvement with the applicant regarding training plans, program plans and other issues which may have major implications for any activities undertaken by the applicant under the cooperative agreement. HRSA will provide consultation and technical assistance in planning, operating, and evaluating activities for the AIANTAC.

Dated: July 12, 2002.

Elizabeth M. Duke,

Administrator.

[FR Doc. 02–19907 Filed 8–6–02; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Advisory Commission on Childhood Vaccines; Notice of Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Public Law 92–463), announcement is made of the following National Advisory body scheduled to meet during the month of September.

Name: Advisory Commission on Childhood Vaccines (ACCV).

Date and Time: September 4, 2002; 9:00 a.m.–12:30 p.m.

Place: Audio Conference Call.

The full ACCV will meet via audio conference call on Wednesday, September 4, from 9:00 a.m. to 12:30 p.m. The public can join the meeting by dialing 1–888–968–3511 on September 4 and provide the following information:

Leader's Name: Thomas E. Balbier, Jr. Password: ACCV.

The agenda items for September 4 will include, but not limited to: an update on the thimerosal class action lawsuits; an update on the CDC influenza vaccine recommendation; a presentation on the

average cost of a health insurance policy; and updates from the Division of Vaccine Injury Compensation, the Department of Justice, and the National Vaccine Program Office.

Persons interested in providing an oral presentation should submit a written request, along with a copy of their presentation to: Ms. Cheryl Lee, Principal Staff Liaison, Division of Vaccine Injury Compensation, Office of Special Programs, Health Resources and Services Administration, Room 8A-46, 5600 Fishers Lane, Rockville, MD 20857 or by e-mail at clee@hrsa.gov. Requests should contain the name, address, telephone number, and any business or professional affiliation of the person desiring to make an oral presentation. Groups having similar interests are requested to combine their comments and present them through a single representative. The allocation of time may be adjusted to accommodate the level of expressed interest. The Division of Vaccine Injury Compensation will notify each presenter by mail or telephone of their assigned presentation time.

Persons who do not file an advance request for a presentation, but desire to make an oral statement, may announce it at the time of the comment period on the audio conference call. These persons will be allocated time as time permits.

Anyone requiring information regarding the ACCV should contact Ms. Cheryl Lee, Principal Staff Liaison, Division of Vaccine Injury Compensation, Office of Special Programs, Health Resources and Services Administration, Room 8A–46, 5600 Fishers Lane, Rockville, Maryland 20857, telephone (301) 443–2124 or e-mail: clee@hrsa.gov.

Agenda items are subject to change as priorities dictate.

Dated: July 31, 2002.

Jane M. Harrison,

Director, Division of Policy Review and Coordination.

[FR Doc. 02–19870 Filed 8–6–02; 8:45 am] BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; Comment Request; HIV Vaccine Awareness Study-Americans' Attitudes

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Allergy and Infectious Diseases (NIAID), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the Federal Register on November 28, 2001, pages 59438–59439 and allowed 60-days for public comment. No comments were received. The purpose