institution is engaged in human subjects research.

All of the modifications and clarifications proposed in OHRP's draft guidance document, including those discussed above, are reflected in the comparison table of the previous guidance documents and the new draft guidance document on OHRP's Web site at *http://www.hhs.gov/ohrp/requests/.* OHRP welcomes comments on its draft guidance.

Dated: December 1, 2006.

Melody Lin,

Deputy Director, Office for Human Research Protections.

[FR Doc. E6–20849 Filed 12–7–06; 8:45 am]

BILLING CODE 4150–36–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Research Misconduct

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Office of Research Integrity (ORI) and the Assistant Secretary for Health have taken final action in the following case:

Nicholas McMaster, University of Chicago: Based on a College Discipline Hearing report and on additional analysis conducted by ORI in its oversight review, the U.S. Public Health Service (PHS) found that Mr. Nicholas McMaster, undergraduate student, Biological Sciences Collegiate Division in the Departments of Psychology and Comparative Human Development at the University of Chicago (UC), engaged in research misconduct supported by National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health (NIH), grant P50 ES12382 and National Institute on Aging (NIA), NIH, grant P01 AG018911.

Specifically, PHS found that Mr. McMaster fabricated data in recording the score for the lordosis reflex and in recording the cell types present in vaginal epithelium from rats in two experimental psychology protocols.

Mr. McMaster has entered into a Voluntary Exclusion Agreement in which he has voluntarily agreed, for a period of three (3) years, beginning on November 14, 2006:

(1) To exclude himself from serving in any advisory capacity to PHS, including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant; and

(2) that any institution which submits an application for PHS support for a research project on which Mr. McMaster's participation is proposed or which uses him in any capacity on PHS supported research, or that submits a report of PHS-funded research in which he is involved, must concurrently submit a plan for supervision of his duties to the funding agency for approval. The supervisory plan must be designed to ensure the scientific integrity of his research contribution. Mr. McMaster also agrees to ensure that the institution submits a copy of the supervisory plan to ORI. He further agrees that he will not participate in any PHS-supported research until such a supervisory plan is submitted to ORI.

FOR FURTHER INFORMATION CONTACT: Director, Division of Investigative Oversight, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453–8800.

Chris B. Pascal,

Director, Office of Research Integrity.

[FR Doc. E6–20927 Filed 12–7–06; 8:45 am]

BILLING CODE 4150–31–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Agency Information Collection Activities; Proposed Collection; Comment Request; Alzheimer's Disease Demonstration Grants to States Program Standardized Data Collection

AGENCY: Administration on Aging, HHS.

ACTION: Notice.

SUMMARY: The Administration on Aging (AoA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on the information collection requirements relating to Alzheimer's Disease Demonstration Grants to States Program

DATES: Submit written or electronic comments on the collection of information by February 6, 2007.

ADDRESSES: Submit electronic comments on the collection of information to: *Lori.Stalbaum@aoa.hhs.gov.* Submit written comments on the collection of information to Administration on Aging, Washington, DC 20201, ATTN: Lori Stalbaum.

FOR FURTHER INFORMATION CONTACT: Lori Stalbaum at 202–357–3452 or e-mail: *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 Alzheimer's Disease Demonstration Grants to States (ADDGS) Program is authorized through Sections 398, 399 and 399A of the Public Health Service (PHS) Act, as amended by Public Law 101–557 Home Health Care and Alzheimer's Disease Amendments of 1990. The ADDGS program funded through AoA helps states extend family support services provided by subgrantees to underserved populations, including those in rural communities.

The PHS Act requires AoA to ''provide for an evaluation of each demonstration project for which a grant is made.'' The PHS Act further states

that ''not later than 6 months after the completion of such evaluations, submit a report to the Congress describing the findings made as a result of the evaluations.'' In compliance with the PHS Act, AoA developed a new State data collection protocol that will require future ADDGS state grantees (those funded starting in FY 2007) to transmit annual data information to AoA reported to the states by the project partners. Many of the elements for the ADDGS Data Program Report are the same as those collected for Older Americans Act Title III and Title VII programs administered by AoA. To ensure inclusion of essential information the ADDGS Project Officer first contacted all current ADDGS grantees to find out what type of information they are already collecting. Then, the ADDGS Project Officer solicited information on key data elements from experts familiar with the previous ADDGS Program evaluation. Following this input, modifications were made to the data collection tool and input was solicited from all ADDGS state Project Directors and their project partners. Twenty-three (23) of thirty-eight (38) states, approximately 60% responded to the request for feedback. Again, modifications were made to fine tune the data collection tool into a format that would minimize burden on state grantees. Finally, ten (10) ADDGS Project Directors participated in a telephone focus group. The ten Project Directors were selected based on the detail of their responses to the original request for feedback.

The result of this input is the proposed data collection tool and accompanying definition of terms. AoA is aware that different states have different capabilities in terms of data collection. Thus, it is understood that following the approval of the proposed ADDGS data collection tool, AoA will need to work with ADDGS grantees to ensure easy access to a reporting system as well as offer regular training to state grantees to ensure minimal burden.

AoA estimates the burden of this collection of information as follows: 950 hours.

Dated: December 5, 2006.

Josefina G. Carbonell,

Assistant Secretary for Aging.

[FR Doc. E6–20890 Filed 12–7–06; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–07–0017]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an e-mail to *omb@cdc.gov*. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

Proposed Project

Application for Training—Revision—Office of Workforce and Career Development (OWCD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) through its Office of Workforce and Career Development (OWCD) and other Centers, Institutes, and Offices offers training activities on public health topics to professionals worldwide. Employees of hospitals, universities, medical centers, laboratories, state and federal agencies, and state and local health departments apply for training in an effort to learn up-to-date public health practices. CDC's training activities include laboratory training, classroom study, online training, and distance learning activities. The ''National Laboratory Training Network Registration Form'' (paper and electronic forms) and the ''CDC Training and Continuing Education New Participant Registration Form'' (electronic form) are official application forms used for training activities conducted by CDC. CDC form 32.1, ''National Laboratory Training Network Registration Form'', is used for all laboratory field training. The ''CDC Training and Continuing Education New Participant Registration Form'' is completed by health practitioners seeking to register for training available through the CDC's online registration system. CDC was granted OMB approval to use these forms through December 31, 2006, and is now requesting OMB approval for an additional three years.

These forms in various versions have been used by CDC to collect data for the past 16 years. The information requested on the forms is used to grant public health professionals the continuing education credits they need to maintain their licenses and certification required by their professions. This information is also needed to create a transcript or summary of training completed at the participant's request. In addition, the forms are also needed to generate management reports and to maintain training statistics. These reports assist CDC in the management of its training programs, such as, identifying training needs, designing courses, selecting locations for courses, evaluating programs, and conducting impact analysis.

There are no costs to the respondents other than their time. The total estimated annualized burden is 3332 hours.

ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
National Laboratory Training Network Registration Form (32.1)	20,000	1	5/60
CDC Training and Continuing Education New Participant Registration Form (36.5)	20,000	1	5/60