

dedicated toll-free DUNS number request line at 800-333-0505 (if you are sole proprietor, dial 866-705-5711 and select option 1).

Applicants may register online with CCR at the Web site: <http://www.ccr.gov>. A CCR handbook and worksheet can also be reviewed at the Web site.

*Number of Awards:* One.

*Applicant's Conference:* An applicant's telephone conference will be held June 3, 2009 between 12 noon EST and 1 pm EST. Applicants who are interested in participating in this applicant's conference call should indicate their expectation to participate by e-mailing Pam Davison at [pdavison@bop.gov](mailto:pdavison@bop.gov) no later than 12 noon on June 1, 2009. This telephone conference will give applicants the opportunity to ask questions about the project and the application procedures. Participation in the telephone conference is optional.

Note that interested applicants need to provide complete contact information, including e-mail address and phone number, to Pam Davison when they indicate their expectation to participate.

*NIC Opportunity Number:* 09M12.

This number should appear as a reference line in the cover letter, where the opportunity number is requested on the Standard Form 424, and outside of the envelope in which the application is sent.

Catalog of Federal Domestic Assistance Number: 16.602

Executive Order 12372. This project is not subject to the provisions of Executive Order 12372.

**Morris L. Thigpen,**

*Director, National Institute of Corrections.*

[FR Doc. E9-11530 Filed 5-15-09; 8:45 am]

**BILLING CODE 4410-36-P**

## DEPARTMENT OF LABOR

### Office of the Secretary; Submission for OMB Review: Comment Request

May 11, 2009.

The Department of Labor (DOL) hereby announces the submission of the following public information collection requests (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (Pub. L. 104-13, 44 U.S.C. chapter 35). A copy of this ICR, with applicable supporting documentation, including among other things a description of the likely respondents, proposed frequency of response, and estimated total burden may be obtained from the [RegInfo.gov](http://RegInfo.gov)

Web site at <http://www.reginfo.gov/public/do/PRAMain> or by contacting Darrin King on 202-693-4129 (this is not a toll-free number)/e-mail: [DOL\\_PRA\\_PUBLIC@dol.gov](mailto:DOL_PRA_PUBLIC@dol.gov).

Interested parties are encouraged to send comments to the Office of Information and Regulatory Affairs, Attn: OMB Desk Officer for the Department of Labor—ESA, Office of Management and Budget, Room 10235, Washington, DC 20503, Telephone: 202-395-7316/Fax: 202-395-6974 (these are not toll-free numbers), E-mail: [OIRA\\_submission@omb.eop.gov](mailto:OIRA_submission@omb.eop.gov) within 30 days from the date of this publication in the **Federal Register**. In order to ensure the appropriate consideration, comments should reference the OMB Control Number (see below).

The OMB is particularly interested in comments which:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility, and clarity of the information to be collected; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

*Agency:* Employment Standards Administration.

*Type of Review:* Revision of a currently approved collection.

*Title of Collection:* Application for a Farm Labor Contractor or Farm Labor Contractor Employee Certificate of Registration.

*OMB Control Number:* 1215-0037.

*Agency Form Number:* WH-530.

*Affected Public:* Private Sector—Businesses or other for-profits and Farms.

*Total Estimated Number of Respondents:* 10,611.

*Total Estimated Annual Burden Hours:* 5,306.

*Total Estimated Annual Costs Burden (excludes hourly wage costs):* \$4,536.

*Description:* The Migrant and Seasonal Agricultural Worker Protection Act provides that no individual may perform farm labor contracting activities

without a certificate of registration. The Form WH-530 is the application form that provides the Department of Labor with the information necessary to issue certificates specifying the farm labor contracting activities authorized. For additional information, see related notice published at Volume 74 Fed. Reg. 4236 on January 23, 2009.

*Agency:* Employment Standards Administration.

*Type of Review:* Extension without change of a currently approved collection.

*Title of Collection:* Notice of Termination, Suspension, Reduction, or Increase in Benefit Payments.

*OMB Control Number:* 1215-0064.

*Agency Form Number:* CM-908.

*Affected Public:* Private Sector—Businesses or other for-profits.

*Total Estimated Number of Respondents:* 325.

*Total Estimated Annual Burden Hours:* 1,400.

*Total Estimated Annual Costs Burden (excludes hourly wage costs):* \$6,300.

*Description:* Coal mine operators who pay monthly benefits must notify the Department's Division of Coal Mine Workers' Compensation (DCMWC) of any change in payments and the reason for that change. DCMWC uses this notification to monitor payments and ensure that beneficiaries receive the correct benefit rate. For additional information, see related notice published at Volume 74 Fed. Reg 7620 on February 18, 2009.

*Agency:* Employment Standards Administration.

*Type of Review:* Extension without change of a currently approved collection.

*Title of Collection:* Request for Earnings Information.

*OMB Control Number:* 1215-0112.

*Agency Form Number:* LS-426.

*Affected Public:* Individuals or households.

*Total Estimated Number of Respondents:* 1,600.

*Total Estimated Annual Burden Hours:* 400.

*Total Estimated Annual Costs Burden (excludes hourly wage costs):* \$720.

*Description:* The Form LS-426 gathers information regarding an employee's average weekly wage. This information is needed for determination of compensation benefits in accordance with section 10 of the Longshore and Harbor Workers' Compensation Act. For additional information, see related notice published at Volume 73 Fed. Reg 79194 on December 24, 2008.

*Agency:* Employment Standards Administration.

*Type of Review:* Extension without change of a currently approved collection.

*Title of Collection:* Migrant and Seasonal Agricultural Worker Protection Act Wage Statement.

*OMB Control Number:* 1215-0148.

*Agency Form Numbers:* WH-501/WH-501S.

*Affected Public:* Private Sector—Businesses or other for-profits and Farms.

*Total Estimated Number of Respondents:* 51,542.

*Total Estimated Annual Burden Hours:* 715,417.

*Total Estimated Annual Costs Burden (excludes hourly wage costs):* \$2,146,250.

*Description:* The Migrant and Seasonal Agricultural Worker Protection Act (MSPA) requires each farm labor contractor, agricultural employer and agricultural association that employs any migrant or seasonal worker to make, keep, and preserve certain wage records for three years for each such worker and to provide an itemized written statement of this information to each migrant and seasonal agricultural worker each pay period. In addition, the MSPA requires that each farm labor contractor provide copies of all the records noted above for the migrant or seasonal agricultural workers the contractor has furnished to other farm labor contractors, agricultural employers or agricultural associations who use the workers. Except for the worker, the recipient of such records is to retain them for a period of three years. For additional information, see related notice published at Volume 74 Fed. Reg 6660 on February 10, 2009.

*Agency:* Employment Standards Administration.

*Type of Review:* Extension without change of a currently approved collection.

*Title of Collection:* Regulations Governing the Administration of the Longshore and Harbor Workers' Compensation Act.

*OMB Control Number:* 1215-0160.

*Agency Form Numbers:* LS-200; LS-201; LS-203; LS-204; LS-262; LS-267; LS-271; LS-274; and LS-513.

*Affected Public:* Individuals or households.

*Total Estimated Number of Respondents:* 175,374.

*Total Estimated Annual Burden Hours:* 66,544.

*Total Estimated Annual Costs Burden (excludes hourly wage costs):* \$66,587.

*Description:* The regulations and forms cover the submission of information relating to the processing of

claims for benefits under the Longshore Act and extensions. For additional information, see related notice published at Volume 74 Fed. Reg 7619 on February 18, 2009.

*Agency:* Employment Standards Administration.

*Type of Review:* Extension without change of a currently approved collection.

*Title of Collection:* Rehabilitation Maintenance Certificate.

*OMB Control Number:* 1215-0161.

*Agency Form Number:* OWCP-17.

*Affected Public:* Individuals or households.

*Total Estimated Number of Respondents:* 1,300.

*Total Estimated Annual Burden Hours:* 2,605.

*Total Estimated Annual Costs Burden (excludes hourly wage costs):* \$0.

*Description:* The OWCP-17 serves as a bill submitted by the program participant or OWCP, requesting reimbursement of expenses incurred due to participation in an approved rehabilitation effort for the preceding four-week period of fraction thereof. For additional information, see related notice published at Volume 74 Fed. Reg 6659 on February 10, 2009.

*Agency:* Employment Standards Administration.

*Type of Review:* Extension without change of a currently approved collection.

*Title of Collection:* Statement of Recovery Forms.

*OMB Control Number:* 1215-0200.

*Agency Form Numbers:* CA-1108 and CA-1122.

*Affected Public:* Private Sector—Businesses or other for-profits and Individuals or households.

*Total Estimated Number of Respondents:* 3,000.

*Total Estimated Annual Burden Hours:* 1,425.

*Total Estimated Annual Costs Burden (excludes hourly wage costs):* \$1,350.

*Description:* These forms are used to obtain information about amounts received as the result of final judgments in litigation, or a settlement of the litigation, brought against a third party who is liable for damages due to a Federal employee comprehensive work-related injury. For additional information, see related notice published at Volume 73 FR 79194 on December 24, 2008.

**Darrin A. King,**

*Departmental Clearance Officer.*

[FR Doc. E9-11469 Filed 5-15-09; 8:45 am]

**BILLING CODE 4510-28-P**

## DEPARTMENT OF LABOR

### Office of the Secretary

#### Combating Exploitive Child Labor Through Education

**AGENCY:** Bureau of International Labor Affairs, Department of Labor.

**ACTION:** Correction. Amendment to Notice of Intent to Solicit Cooperative Agreement Applications.

**SUMMARY:** In the **Federal Register** of April 10, 2009 (Vol. 74, p. 16428), the Department of Labor published a Notice of Intent to Solicit Cooperative Agreement Applications. This is an amendment to the "Key Dates" and "Bidders' Meeting" sections of the earlier **Federal Register** notice.

#### Amendments

A. On page 16429, Key Dates, column 1, delete the sentence: "The SGA(s) will remain open for at least 60 days from the date of publication." Replace with the following sentence: "USDOL intends to leave the SGA open for 45-60 days from the date of publication."

B. On page 16429, For Further Information Contact, Bidders' Meeting, column 1, delete the sentence: "USDOL intends to hold a bidders' meeting on May 28, 2009 in Washington, DC at the Department of Labor from 1:30 p.m. to 3:30 p.m." Replace with the following sentence: "USDOL intends to hold a bidders' meeting on June 24, 2009 in Washington, DC at the Department of Labor from 1:30 p.m. to 3:30 p.m."

C. On page 16429, For Further Information Contact, Bidders' Meeting, column 1, delete the sentence: "To register for the meeting, please call or email Ms. Doris Senko (Phone: 202-693-4843; E-mail: [senko.doris@dol.gov](mailto:senko.doris@dol.gov)) by May 21, 2009." Replace with the following sentence: "To register for the meeting, please call or email Ms. Doris Senko (Phone: 202-693-4843; E-mail: [senko.doris@dol.gov](mailto:senko.doris@dol.gov)) by June 17, 2009."

*Agency Contacts:* Ms. Lisa Harvey. E-mail address: [harvey.lisa@dol.gov](mailto:harvey.lisa@dol.gov). All inquiries should make reference to the USDOL Combating Child Labor through Education—Solicitations for Cooperative Agreement Applications. Potential applicants should not submit inquiries to USDOL for further information on the award opportunities outlined in the April 10, 2009 Notice of Intent until after USDOL has published the solicitation(s) for cooperative agreement applications, which will occur prior to September 30, 2009.