revised estimates reflect input obtained by the EEOC during a limited survey of school districts with varying resource levels and student populations. The school districts provided information on the types of employees that participate in preparation of the EEO–5 report and the amount of time spent by each type of employee. After accounting for the time spent by the various employees who have a role in preparing an EEO–5, the EEOC estimates that a school district will spend 17.07 hours to prepare the report, and estimates that the aggregate biennial hour burden for all respondents is 102,839.32. The cost associated with the burden hours was calculated using median hourly wage rates obtained from the Department of Labor [2] for each job identified above as participating in the submission of the survey; the burden hour cost per school district will be approximately $539.57, while the estimated total biennial burden cost for all 6024 school districts will be $3,250,361.25 (See Table 1 [3]).

TABLE 1—ESTIMATE OF BURDEN FOR EEO–5 REPORT

| | Hourly wage rate | Burden hours per district | Burden hour cost per district [4] | Total burden hours [5] | Total burden hour cost [6] |
|---|---|---|---|---|---|
| | | | | | N = 6024 |
| COMPUTER SUPPORT SPECIALIST (IT PROFESSIONAL/DATA PROCESSING SPECIALIST) | 25.21 | 3.4286 | 86.4343 | 20653.7143 | 520680.1371 |
| DIRECTOR OF SCHOOL FINANCE (FINANCIAL MANAGERS) | 56.73 | 0.1429 | 8.1043 | 860.5714 | 48820.2171 |
| EXECUTIVE CLERICAL STAFF | 26.66 | 2.9286 | 78.0757 | 17641.7143 | 470328.1029 |
| HUMAN RESOURCE SPECIALIST | 28.06 | 5.4286 | 152.3257 | 32701.7143 | 917610.1029 |
| PAYROLL SPECIALIST | 20.26 | 1.4286 | 28.9429 | 8605.7143 | 174351.7714 |
| SENIOR HUMAN RESOURCE MANAGERS | 50.21 | 3.4286 | 172.1486 | 20653.7143 | 1037022.9943 |
| SUPERINTENDENT (SCHOOL MANAGEMENT OCCUPATIONS | 47.38 | 0.2857 | 13.5371 | 1721.1429 | 81547.7486 |
| SUB TOTAL | | 17.0716 | 539.5686 | 102839.3184 | 3250361.2464 |

These estimates are based on an assumption of paper reporting. However, the EEOC has made electronic filing much easier for respondents required to file the EEO–5 Report. As a result, more respondents are using this filing method. This development, along with the greater availability of human resource information software, is expected to significantly reduce the actual burden of reporting. The Commission continues to develop more reliable estimates of reporting burdens given the significant increase in electronic filing and explore new approaches to make such reporting even less burdensome. In order to help reduce survey burden, respondents are encouraged to report data electronically, whenever possible.

Dated: July 24, 2017.

For the Commission.

**Victoria A. Lipnic,**

*Acting Chair.*

[FR Doc. 2017–16340 Filed 8–2–17; 8:45 am]

**BILLING CODE 6570–01–P**

[2] Median hourly wage rates were obtained from the Bureau of Labor Statistics (see U.S. Dept. of Labor, Bureau of Labor Statistics, Occupational Outlook Handbook, *http://www/bls.gov/ooh/*)

[3] Figures shown in table have been rounded.

[4] The figures in this column were calculated by multiplying the figures in the Hourly Wage Rate column by those in the Burden Hours Per District Column.

[5] The figures in this column were calculated by multiplying the figures in the Burden Hours Per District column by 6024, the total number of respondents.

[6] The figures in this column were calculated by multiplying the figures in the Burden Hour Cost Per District column by 6024, the total number of respondents.

## FEDERAL RESERVE SYSTEM

### Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than August 17, 2017.

*A. Federal Reserve Bank of Minneapolis* (Brendan S. Murrin, Assistant Vice President) 90 Hennepin Avenue, Minneapolis, Minnesota 55480–0291:

1. *Boyd Brent Myers, Tazewell, Tennessee, as trustee of six McNeilus family trusts, all of Rochester, Minnesota;* to retain control of the voting shares of Sterling Financial Group, Inc., Rochester, Minnesota, and thereby indirectly retain control of Sterling State Bank, Austin, Minnesota.

Board of Governors of the Federal Reserve System, July 28, 2017.

**Yao-Chin Chao,**

*Assistant Secretary of the Board.*

[FR Doc. 2017–16292 Filed 8–2–17; 8:45 am]

**BILLING CODE 6210–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[30Day–17–0576]**

### Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is

published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (a) 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; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) 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; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570 or send an email to *omb@cdc.gov.* Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

Possession, Use, and Transfer of Select Agents and Toxins (42 CFR part 73)—Revision—Centers for Disease Control and Prevention (CDC)/Division of Select Agents and Toxins (DSAT) and United States Department of Agriculture (USDA) Animal and Plant Health Inspection Service (APHIS)/Agriculture Select Agent Services (AgSAS).

*Background and Brief Description*

Subtitle A of the Public Health Security and Bioterrorism Preparedness and Response Act of 2002, (42 U.S.C. 262a), requires the United States Department of Health and Human Services (HHS) to regulate the possession, use, and transfer of biological agents or toxins that have the potential to pose a severe threat to public health and safety (select agents and toxins). Subtitle B of the Public Health Security and Bioterrorism Preparedness and Response Act of 2002 (which may be cited as the Agricultural Bioterrorism Protection Act of 2002), (7 U.S.C. 8401), requires USDA to regulate the possession, use, and transfer of biological agents or toxins that have the potential to pose a severe threat to animal or plant health, or animal or plant products (select agents and toxins). The HHS Secretary delegated the responsibility for promulgating and implementing select agent regulations found at 42 CFR part 73 to CDC Division of Select Agents and Toxins (DSAT). The United States Department of Agriculture (USDA) Animal and Plant Health Inspection Service (APHIS)/ Agriculture Select Agent Services (AgSAS) was delegated responsibility by USDA for select agent regulations (7 CFR part 331, and 9 CFR part 121). The Federal Select Agent Program (FSAP) is the collaboration of the DSAT and AgSAS to administer the select agent regulations in a manner to minimize the administrative burden on persons subject to the select agent regulations. Accordingly, CDC and APHIS have adopted an identical system to collect information for the possession, use, and transfer of select agents and toxins.

CDC is requesting OMB approval to revise the collected information under the select agent regulations through the use of the APHIS/CDC Form 3 (Incident Notification and Reporting (Theft/Loss/ Release)). The form (42 CFR 73.19(a),(b)) must be completed by an individual or an entity whenever the individual or entity experiences a theft, loss, or release of a select agent or toxin. CDC is proposing to revise the form to further clarify what needs to be reported as a ''release'' and ''loss'' and additional fields to assist with categorizing the type of release (*e.g.,* spill within secondary containment, occupational exposure, possible breach of facility containment, etc.), type of exposure, and the understanding of safety and security risk levels relative to human illness. Guidance documents were also added to assist with the following forms: Application for Registration (APHIS/CDC Form 1), Request to Transfer Select Agents and Toxins (APHIS/CDC Form 2), Report of Identification of a Select Agent or Toxin (APHIS/CDC Form 4), Request of Exemption of Select Agents and Request for Exclusions Toxins for an Investigational Product (APHIS/CDC Form 5), Request for Expedited Review, Security Plan, Security Plan, Biosafety Plan, Request Regarding a Restricted Experiment, Incident Response Plan, Training, and Records.

Annualized burden hours and cost were calculated based on data obtained from 2016 Annual Report of the Federal Select Agent Program for submissions to FSAP for 2016. CDC requests a three year approval for this Revision. The estimated annualized Burden has been reduced to 8,408 hours due to the decrease in the number of Respondents. There is no cost to Respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

| Section | Form name | Number of respondents | Number of responses per respondent | Average burden per response (in hours) |
|---|---|---|---|---|
| 73.7 | Application for Registration (APHIS/CDC Form 1) | 1 | 1 | 4 |
| 73.7 | Amendment to a Certificate of Registration | 238 | 7 | 1 |
| 73.7 | Application for Registration (APHIS/CDC Form 1) Guidance | 1 | 1 | 1 |
| 73.16 | Request to Transfer Select Agents and Toxins (APHIS/CDC Form 2) | 188 | 1 | 1 |
| 73.16 | Request to Transfer Select Agents and Toxins (APHIS/CDC Form 2) Guidance. | 188 | 1 | 30/60 |
| 73.19 | Report of Theft, Loss, or Release of Select Agent or Toxin (APHIS/CDC Form 3). | 205 | 1 | 90/60 |
| 73.19 | Report of Theft, Loss, or Release of Select Agent or Toxin (APHIS/CDC Form 3) Guidance. | 205 | 1 | 30/60 |
| 73.5 & 6 | Report of Identification of a Select Agent or Toxin from a Clinical/Diagnostic Specimen (APHIS/CDC Form 4A). | 1,030 | 1 | 30/60 |
| 73.5 & 6 | Report of Identification of a Select Agent or Toxin from a Proficiency Test (APHIS/CDC Form 4B). | 10 | 1 | 30/60 |

ESTIMATED ANNUALIZED BURDEN HOURS—Continued

| Section | Form name | Number of respondents | Number of responses per respondent | Average burden per response (in hours) |
|---|---|---|---|---|
| 73.5 & 6 | Federal Law Enforcement Reporting Seizure of Select Agent or Toxin (APHIS/CDC Form 4C). | 1 | 1 | 30/60 |
| 73.5 & 6 | Report of Identification of a Select Agent or Toxin (APHIS/CDC Form 4) Guidance. | 1,030 | 1 | 30/60 |
| 73.5 & 73.6 | Request of Exemption of Select Agents and Toxins for an Investigational Product (APHIS/CDC Form 5). | 1 | 1 | 30/60 |
| 73.5 & 73.6 | Request of Exemption of Select Agents and Toxins for an Investigational Product (APHIS/CDC Form 5) Guidance. | 1 | 1 | 30/60 |
| 73.3 & 73.4 | Request for Exclusions | 3 | 1 | 30/60 |
| 73.3 & 73.4 | Request for Exclusions Guidance | 3 | 1 | 30/60 |
| 73.9 | Documentation of Self-inspection | 238 | 1 | 1 |
| 73.1 | Request for Expedited Review | 1 | 1 | 15/60 |
| 73.1 | Request for Expedited Review Guidance | 1 | 1 | 15/60 |
| 73.11 | Security Plan | 238 | 1 | 5 |
| 73.11 | Security Plan Guidance | 238 | 1 | 30/60 |
| 73.11 | Security Plan Template | 238 | 1 | 30/60 |
| 73.12 | Biosafety Plan | 238 | 1 | 5 |
| 73.12 | Biosafety Plan Guidance | 238 | 1 | 30/60 |
| 73.12 | Biosafety Plan Template | 238 | 1 | 30/60 |
| 73.13 | Request Regarding a Restricted Experiment | 1 | 1 | 30/60 |
| 73.13 | Request Regarding a Restricted Experiment Guidance | 1 | 1 | 30/60 |
| 73.14 | Incident Response Plan | 238 | 1 | 5 |
| 73.14 | Incident Response Plan Guidance | 238 | 1 | 30/60 |
| 73.14 | Incident Response Plan Template | 238 | 1 | 30/60 |
| 73.15 | Training | 238 | 1 | 30/60 |
| 73.15 | Training Guidance | 238 | 1 | 30/60 |
| 73.17 | Records | 238 | 1 | 30/60 |
| 73.17 | Guidance on the Inventory of Select Agents | 238 | 1 | 30/60 |
| 73.20 | Administrative Review | 1 | 1 | 1 |

**Leroy A. Richardson,**

*Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.*

[FR Doc. 2017–16333 Filed 8–2–17; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

**[Docket No. CDC–2014–0015]**

### Vaccines Adverse Event Reporting System (VAERS) 2.0 Form

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

**ACTION:** Notice.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), located within the Department of Health and Human Services (HHS) announces the availability of the final Vaccines Adverse Event Reporting System (VAERS) 2.0 Form *www.vaers.hhs.gov.* The VAERS 2.0 Form replaces the VAERS–1 Form which had been in use since 1990.

**DATES:** The VAERS 2.0 Form was implemented June 30, 2017.

**FOR FURTHER INFORMATION CONTACT:** Tiffany Suragh, National Center for Emerging and Zoonotic Infectious Diseases, Centers for Disease Control and Prevention, 1600 Clifton Road NE., Mailstop D–26; Atlant, Georgia 30329–4018; Telephone: (404) 498–0681.

**SUPPLEMENTARY INFORMATION:** VAERS is an important and critical ''early warning system'' in the federal vaccine safety infrastructure for identifying adverse events after receipt of childhood, adolescent, and adult vaccines licensed for use in the United States. Healthcare providers and vaccine manufacturers are required under section 2125(b) of the Public Health Service Act (42 U.S.C. 300aa–25(b)) to submit VAERS reports regarding the occurrence of any event set forth in the Vaccine Injury Table which occurs within 7 days of the administration of any vaccine set forth in the Table or within such longer period as is specified in the Table and the occurrence of any contraindicating reaction to a vaccine which is specified in the manufacturer's package insert. VAERS also accepts reports on adverse events following receipt of other vaccines. Patients, parents and others aware of adverse events can also submit VAERS reports. Although VAERS is not designed to assess if a vaccine caused an adverse event, VAERS provides HHS/CDC and HHS/FDA with important early information that might signal a potential problem. If the VAERS data suggest a possible association between an adverse event and vaccination, the relationship will be further assessed. In recent years VAERS has received approximately 40,000 U.S. reports annually.

VAERS is a mandated activity for the Department of Health and Human Services (HHS) and VAERS data are used by Federal agencies, State Health Officials, health care providers, manufacturers, and the public. Therefore, it is important to maximize the usefulness of this system. The information collected by the final VAERS 2.0 Form will be similar to that from the current VAERS–1 Form so historical comparisons can be made. However, the changes in the final VAERS 2.0 Form should improve reporting efficiency and data quality. VAERS 2.0 Form offers standardized responses, clearer instructions and guidance, and improved online reporting capability. Select questions