competing awards. The granting agency does not guarantee to "accommodate or explain" state process recommendations it receives after that date.

Catalog of Federal Domestic Assistance Number

The Catalog of Federal Domestic Assistance Number is 93.197.

Application Submission and Deadline

South Carolina Department of Health and Environmental Control must submit the original and two copies of the application PHS Form 5161–1, and should carefully adhere to the instruction sheet and information provided. The application should be submitted on or before August 12, 1991 to Henry S. Cassell, III, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control, 255 East Paces Ferry Road, NE., room 300, Atlanta, GA 30305.

Where To Obtain Additional Information

If you are interested in obtaining addition information regarding this project, please refer to announcement 156 and contact the following: Business Management Technical Assistance, Lisa Tamaroff, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control, 255 East Paces Ferry Road, NE., room 300, Mailstop E–14, Atlanta, Georgia 30305, (404) 842–6630 or FTS 236–6630.

Programmatic Technical Assistance may be obtained from Jerry Hershovitz, Deputy Chief, Lead Poisoning Prevention Branch, Division of Environmental Hazards and Health Effects, Center for Environmental Health and Injury Control, Centers for Disease Control, 1600 Clifton Road, NE., Mailstop F–28, Atlanta, Georgia 30333, (404) 488–4880 or FTS 236–4880.

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 may be obtained through the Superintendent of Documents, Government Printing Office, Washington, DC 20402–9325, telephone (202) 783–3238.

Dated: August 2, 1991.

Robert L. Foster,

Acting Director, Office of Program Support, Centers For Disease Control.

[FR Doc. 91–18814 Filed 8–7–91; 8:45 am]

BILLING CODE 4160–18–M

[Announcement Number 150]

Availability of Funds for Fiscal Year 1991 Modified System for AIDS Case Reporting and Ascertainment of HIV-Related Morbidity

Introduction

The Center for Disease Control (CDC) announces a program for competitive cooperative agreement applications to assist state and local health departments in simplifying reporting of AIDS and HIV-related morbidity. Throughout program activities, special emphasis is to be placed on developing and evaluating a simplified, yet effective surveillance system for symptomatic HIV-related disease, while maintaining quality of data collection and the integrity of the current AIDS surveillance system. The new system will be based on a modified surveillance definition which includes CD4+ cell counts.

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority areas of HIV Infection and Surveillance and Data Systems. (For ordering a copy of Healthy People 2000, see the section Where to Obtain Additional Information.)

Authority

These cooperative agreements are authorized under sections 301(a) [42 U.S.C. 241(a)] and 311 [42 U.S.C. 243] of the Public Health Service Act, as amended.

Eligible Applicants

Eligible applicants are official state and local health agencies who are current recipients of HIV/AIDS surveillance cooperative agreements who have reported at least 1,000 cumulative cases of AIDS to CDC as of December 31, 1990.

Availability of Funds

Approximately $800,000 will be available in Fiscal Year 1991 to fund 2–4 cooperative agreements. Awards are expected to range from $200,000–$400,000. Awards will begin on or about September 27, 1991 and will be for a 23-month budget period within a 2-year project period. Funding estimates may vary and are subject to change, depending on the availability of funds. Continuation awards within the project period will be made on the basis of satisfactory progress and on the availability of funds.

Purpose

The purpose of this announcement for cooperative agreements is to provide assistance to state and local public health departments in the development, implementation, and evaluation of a simplified method of reporting AIDS and HIV-related morbidity, which will be based on CD4+ cell counts and clinical symptoms. The new system must not interfere with the integrity of the existing national surveillance system while under development and evaluation. It is anticipated that the simplified reporting system proposed in response to this announcement may vary with local conditions and practices. It is anticipated that successful components of this pilot project will be incorporated into a modified national surveillance system.

Program Requirements

In conducting activities to achieve the purpose of this program, the recipient shall be responsible for conducting activities under A. below and CDC will be responsible for conducting activities under B. below. The application should be presented in a manner that demonstrates the applicant's ability to address the proposed activities in a collaborative manner with CDC.

A. Recipient Activities

1. Participate in national planning and implementation meetings supported through travel funds awarded in this cooperative agreement.

2. Develop and implement data collection procedures and forms for core data items that can be aggregated by CDC. The minimum core data items shall include, but not necessarily be limited to, demographic and immunologic characteristics, e.g., CD4+ cell count, risk category, and selected clinical conditions.

3. Ensure confidentiality of persons with confirmed or suspected HIV infection.

4. Maintain responsibility for analysis and presentation of data collected for local purposes.

5. Develop an effective and efficient simplified case reporting system which would monitor indicator conditions and other modified elements of the current surveillance system through sampling or other mechanisms.

6. Demonstrate the ability to collect case reports on HIV disease using a surveillance definition which incorporates absolute CD4+ cell counts.

7. Maintain the integrity of the existing national HIV/AIDS reporting system during the development and evaluation of the proposed project and

demonstrate coordination with existing HIV/AIDS surveillance activities.

8. Evaluate the usefulness of the modified system in comparison to the existing AIDS surveillance system.

9. Identify and select appropriate staff.

B. CDC Activities

1. Assist in the development, implementation, and evaluation of general and site-specific methods for simplifying surveillance of HIV/AIDS-related morbidity.

2. Provide assistance to the collaborator in the design and conduct of the project, including technical guidance in the development of reporting protocols, data collection forms, training and pretesting methods, and the design of data management systems.

3. Provide coordination among participants for the project to ensure comparability of core data items.

4. Maintain responsibility for the compilation of analyses, and presentation of results of aggregate data from multiple sites.

Evaluation Criteria

Eligible applications submitted under this announcement will be evaluated according to the following criteria:

1. The quality of plans to develop and implement the surveillance system describing how potential sources of surveillance data will be identified, accessed, used, and verified, including a plan to protect the confidentiality of all surveillance data. The plan should also address the applicant's authority to collect or ability to accept, on a voluntary basis, reports of cases meeting a revised surveillance definition. (30 points)

2. The applicant's current activities in the surveillance of AIDS, other HIV disease, and asymptomatic infection. Higher priority will be given to sites that demonstrate the ability to conduct population-based surveillance for a broad spectrum of HIV-related disease including assessment of underlying immune status (i.e. CD4+ cell counts). The cumulative number of reported AIDS cases will be a consideration. (20 points)

3. The applicant's understanding of the purpose of the project and the applicant's ability, willingness and/or need to cooperate in the project with CDC and other participants. (20 points)

4. The quality of the applicant's plan to evaluate the usefulness of the proposed system in comparison to the existing AIDS reporting system. (15 points)

5. The extent to which the proposal describes how the project will be administered, including the size, qualifications, and time allocation of the proposed staff and the availability of facilities to be used during the surveillance pilot and a schedule for accomplishing the activities of the pilot, including time frames. (15 points)

6. The extent to which the budget is reasonable, clearly justified, and consistent with the intended use of funds. (Not Weighted)

Other Requirements

Recipients must comply with the document titled Content of AIDS-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey Instruments, and Educational Sessions (January 1991). In complying with the Program Review Panel requirements contained in this document, recipients are encouraged to use an existing Program Review Panel such as the one created by the health department's HIV/AIDS Prevention Program.

Projects involving the collection of information from 10 or more individuals and funded by cooperative agreement will be subject to review by the Office of Management and Budget (OMB) under the Paperwork Reduction Act.

Executive Order 12372 Review

Applications are subject to Intergovernmental Review of Federal Programs as governed by Executive Order 12372. E.O. 12372 sets up a system for state and local government review of proposed Federal assistance applications. Applicants (other than Federally-recognized Indian tribal governments) should contact their state Single Point of Contact (SPOCs) as early as possible to alert them to the prospective applications and receive any necessary instructions on the state process. For proposed projects serving more than one state, the applicant is advised to contact the SPOC of each affected state. A current list of SPOCs is included in the application kit. The due date for state process recommendations will be 30 days after the application deadline date for new and competing continuation awards (the appropriations for these financial assistance awards were received late in the fiscal year and would not allow for an application receipt date which would accommodate the 60 day state recommendation process within fiscal year 1991). If SPOCs have any state process recommendations on applications submitted to CDC, they should submit them to Candice Nowicki, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control, room 300, Mailstop E–14, 255 East Paces Ferry Road, NE., Atlanta, Georgia 30305. The granting agency does not guarantee to "accommodate or explain" for state process recommendations it receives after that date.

Catalog of Federal Domestic Assistance Number

The Catalog of Federal Domestic Assistance number assigned to this program is 93.118.

Application Submission and Deadline

The original and two copies of the application form PHS–5161–1 (Rev. 3/89) must be submitted to Candice Nowicki, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control, room 300, Mailstop E–14, 255 East Paces Ferry Road, NE., Atlanta, Georgia 30305, on or before August 16, 1991.

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 independent review group. (Applicants should 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 shall not be acceptable as proof of timely mailing.)

2. *Late Applications*: Applications that do not meet the criteria in either paragraph 1.a. or 1.b. immediately above are considered late applications and will not be considered in the current competition and will be returned to the applicant.

Where to Obtain Additional Information

A complete program description, information on application procedures, an application package, and business management technical assistance may be obtained from Nealean Austin, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control, 255 East Paces Ferry Road, NE., room 300, Mailstop E–14, Atlanta, Georgia, 30305, (404) 842–6743 or FTS 236–6743.

Please refer to Announcement Number 150, when requesting information and submitting any application.

Programmatic technical assistance may be obtained from Ruth Berkelman, M.D., Chief, Surveillance Branch,

Division of HIV/AIDS, Center for Infectious Diseases, 1600 Clifton Road, NE., Mailstop E-47, Centers for Disease Control, Atlanta, GA 30333, (404) 639-2050 or FTS 236-2050.

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) through the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9325 (Telephone (202) 783-3238).

Dated: August 2, 1991.

Robert L. Foster,

Acting Director, Office of Program Support, Centers for Disease Control.

[FR Doc. 91-18815 Filed 8-7-91; 8:45 am]

BILLING CODE 4160-18-M

Food and Drug Administration

[Docket No. 91F-0271]

Atochem North America, Inc.; Filing of Food Additive Petition

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Atochem North America, Inc., has filed a petition proposing that the food additive regulations be amended to provide for the safe use of β,3(or 4)-bis(octadecylthio)cyclohexylethane as an antioxidant in polymeric articles intended for food contact applications.

FOR FURTHER INFORMATION CONTACT: Vir Anand, Center for Food Safety and Applied Nutrition (HFF-335), Food and Drug Administration, 200 C Street SW., Washington, DC 20204, 202-472-5690.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sec. 409(b)(5) (21 U.S.C. 348(b)(5))), notice is given that a petition (FAP 1B4274) has been filed by Atochem North America, Inc., c/o 1150 17th St. NW., Washington, DC 20036, proposing that the food additive regulations in § 176.170 Components of paper and paperboard in contact with aqueous and fatty foods (21 CFR 176.170) be amended to provide for the safe use of β,3(or 4)-bis(octadecylthio)cyclohexylethane as an antioxidant in polymeric articles intended for food contact applications.

The potential environmental impact of this action is being reviewed. If the agency finds that an environmental impact statement is not required and this petition results in a regulation, the notice of availability of the agency's finding of no significant impact and the evidence supporting that finding will be published with the regulation in the **Federal Register** in accordance with 21 CFR 25.40(c).

Dated: July 26, 1991.

L. Robert Lake,

Acting Director, Center for Food Safety and Applied Nutrition.

[FR Doc. 91-18910 Filed 8-7-91; 8:45 am]

BILLING CODE 4160-01-M

[Docket No. 91P-0166]

Cottage Cheese Deviating From Identity Standard; Temporary Permit for Market Testing

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that a temporary permit has been assigned to Crowley Foods, Inc., to market test a product designated as "nonfat cottage cheese" that deviates from the U.S. standards of identity for cottage cheese (21 CFR 133.128), dry curd cottage cheese (21 CFR 133.129), and lowfat cottage cheese (21 CFR 133.131). The purpose of the temporary permit is to allow the applicant to measure consumer acceptance of the product, identify mass production problems, and assess commercial feasibility.

DATES: This permit is effective for 15 months, beginning on the date the food is introduced or caused to be introduced into interstate commerce, but not later than November 6, 1991.

FOR FURTHER INFORMATION CONTACT: Howard A. Anderson, Center for Food Safety and Applied Nutrition (HFF-414), Food and Drug Administration, 200 C Street SW., Washington, DC 20204, 202-485-0349.

SUPPLEMENTARY INFORMATION: In accordance with 21 CFR 130.17 concerning temporary permits to facilitate market testing of foods deviating from the requirements of the standards of identity promulgated under section 401 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 341), FDA is giving notice that a temporary permit has been issued to Crowley Foods, Inc., Metro Center, 49 Court St., P.O. Box 549, Binghamton, NY 13902.

The permit covers limited interstate marketing tests of a nonfat cottage cheese, formulated from dry curd cottage cheese and a dressing, such that the finished product contains less than 0.5 percent milkfat. The food deviates from the U.S. standards of identity for cottage cheese (21 CFR 133.128) and lowfat cottage cheese (21 CFR 133.131) in that the milkfat content of cottage cheese is not less than 4.0 percent, and the milkfat content of lowfat cottage cheese ranges from 0.5 to 2.0 percent. The test product also deviates from the U.S. standard of identity for dry curd cottage cheese (21 CFR 133.129) because of the added dressing. The test product meets all requirements of the standards with the exception of these deviations. The purpose of these variations is to offer the consumer a product that is nutritionally equivalent to cottage cheese products with dressing but contains less fat.

For the purpose of this permit, the name of the product is "nonfat cottage cheese." The information panel of the label must bear nutritional labeling in accordance with 21 CFR 101.9.

This permit provides for the temporary marketing of 600,000 pounds (272,155 kilograms) of the test product. The product will be manufactured at Crowley Foods, Inc., Theresa Rd., LaFargeville, NY 13636, and distributed in Alabama, Connecticut, Delaware, Florida, Georgia, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, Mississippi, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, and West Virginia.

Each of the ingredients used in the food must be stated on the label as required by the applicable sections of 21 CFR part 101. This permit is effective for 15 months, beginning on the date the food is introduced into interstate commerce, but not later than November 6, 1991.

Dated: July 30, 1991.

L. Robert Lake,

Acting Director, Center for Food Safety and Applied Nutrition.

[FR Doc. 91-18826 Filed 8-7-91; 8:45 am]

BILLING CODE 4160-01-M

[Docket No. 91G-0253]

Procter & Gamble Co.; Filing of Petition for Affirmation of Gras Status

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing that Procter & Gamble Co. has filed a petition (GRASP 1G0373), proposing to affirm that caprenin, a triglyceride derived from the esterification of glycerol with capric, caprylic, and behenic acids, is generally recognized as

safe (GRAS) for use as a confectionery fat in soft candy and confectionery coatings.

DATES: Written comment by October 7, 1991.

ADDRESSES: Submit written comments to the Dockets Management Branch (HFA–305), Food and Drug Administration, Rm 1–23, 12420 Parklawn Dr., Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Lawrence J. Lin, Center for Food Safety and Applied Nutrition (HFF–333), Food and Drug Administration, 200 C Street SW., Washington, DC 20204, 202–472–5740.

SUPPLEMENTARY INFORMATION: Under the Federal Food, Drug, and Cosmetic Act (sections 201(s), 4098 (21 U.S.C. 321(s), 348)) and the regulations for affirmation of GRAS status in § 170.35 (21 CFR 170.35), notice is given that Procter & Gamble Co., 6300 Center Hill Rd., Cincinnati, OH 45224, has filed a petition (GRASP 1G0373), proposing that caprenin, a triglyceride derived from the esterification of glycerol with capric, caprylic, and behenic acids, be affirmed as GRAS for use as a confectionery fat in soft candy and confectionery coatings. The petition has been placed on display at the Dockets Management Branch (address above).

Any petition that meets the requirements outlined in §§ 170.30 and 170.35 (21 CFR 170.30 and 170.35) is filed by the agency. There is no prefiling review of the adequacy of data to suppport a GRAS conclusion. Thus, the filing of this petition for GRAS affirmation should not be interpreted as a preliminary indication of suitability of caprenin for GRAS affirmation.

The potential environmental impact of this action is being reviewed. If the agency finds that an environmental impact statement is not required and this petition results in a regulation, the notice of availability of the agency's finding of no significant impact and the evidence supporting that finding will be published with the regulation in the Federal Register in accordance with 21 CFR 25.40(c).

Interested persons may, on or before October 7, 1991, review the petition and/or file comments (two copies, identified with the docket number found in brackets in the heading of this document) with the Dockets Management Branch (address above). Comments should include any available information that would be helpful in determining whether the substance is, or is not, GRAS for the proposed use. A copy of the petition and received comments may be seen in the Dockets Management Branch between 9 a.m. and 4 p.m., Monday through Friday.

Dated: July 29, 1991.

L. Robert Lake,

Acting Director, Center for Food Safety and Applied Nutrition.

[FR Doc. 91–18911 Filed 8–7–91; 8:45 am]

BILLING CODE 4160–01–M

Health Resources and Services Administration

Program Announcement and Final Project Requirements, Funding Preference and Priority for Grants for Interdisciplinary Training for Health Care for Rural Areas

The Health Resources and Services Administration (HRSA) announces the final project requirements, funding preference and priority for fiscal year (FY) 1991, Grants for Interdisciplinary Training for Health Care for Rural Areas, section 799A of the Public Health Service (PHS) Act, as amended.

Purposes

Section 799A of the Public Health Service Act, as amended by Public Law 100–607, authorizes the Secretary to award grants for interdisciplinary training projects designed to provide or improve access to health care in rural areas. Specifically, projects funded under this authority shall be designed to:

(a) Use new and innovative services in rural areas; practitioners to provide services in rural areas;

(b) Demonstrate and evaluate innovative interdisciplinary methods and models designed to provide access to cost-effective comprehensive health care;

(c) Deliver health care services to individuals residing in rural areas;

(d) Enhance the amount of relevant reserach conducted concerning health care issues in rural areas; and

(e) Increase the recruitment areas and make rural practice a more attractive career choice for health care practitioners.

A recipient of funds may use various methods in carrying out the projects described above. The legislation cites the following methods as examples:

(a) The distribution of stipends to students of eligible applicants;

(b) The establishment of a postdoctoral fellowship program;

(c) The training of faculty in the economic and logistical problems confronting rural health care delivery systems; or

(d) The purchase or rental of transportation and telecommunication equipment where the need for such equipment due to unique characteristics of the rural area is demonstrated by the recipient.

Healthy People 2000 Objectives

The PHS is committed to achieving the health promotion and disease prevention objections of Healthy People 2000 a PHS-led national activity for setting priority areas. This program of Grants for Interdisciplinary Training for Health Care for Rural Areas is related to the priority area of Educational and Community-Based Programs.

Potential applicants may obtain a copy of Healthy People 2000 (Full Report; Stock No. 017–001–00474–0) of Healthy People 2000 (Summary Report; Stock No. 017–001–00473–1) through the Superintendent of Documents, Government Printing Office, Washington, DC 20402–9325 (Telephone 202–783–3238).

Education and Service Linkage

As part of its long-range planning, HRSA will be targeting its efforts to strengthening linkages between its training programs and U.S. Public Health Service programs which provide comprehensive primary health care services to the underserved. Applicants are encouraged to offer clinical training in facilities serving the underserved.

Eligibility

To the eligible for a Grant for Interdisciplinary Training for Health Care for Rural Areas, each applicant must be located in a State and be:

1. A local health department, or

2. A nonprofit organization, or

3. A public or nonprofit college, university or school of, or program that specializes in nursing, psychology, social work, optometry, public health, dentistry, osteopathic medicine, physician assistants, pharmacy, podiatric medicine, allopathic medicine, chiropractic, or allied health professions.

For-profit entities are not eligible to obtain funds under section 799A either directly or through subgrants or subcontracts.

Each application must be jointly submitted by at least two eligible applicants. One of the applicants must be an academic institution. Each application must demonstrate the need and demand for health care services, knowledge of available resources and the most significant service and educational gaps within its targeted geographic area. One applicant must be designated the principal organization