Birmingham), a lower dose of anti-CD3–IT given 15 hours before transplant with other conditioning agents (donor bone marrow or total lymphoid irradiation), markedly prolongs the lifetime of mismatched renal allografts and has lead to stable tolerance in some recipients. These studies suggest that the anti-CD3 immunotoxin can induce allospecific CTL hyporesponsiveness in rhesus kidney allograft recipients and this treatment has potential for inducing tolerance to allografts in humans.

Another application of this technology is in the treatment of autoimmune diseases. Dr. Neville's laboratory has demonstrated that anti-CD3-IT treatment moderates the course of an experimental T cell driven autoimmune disease (myelin basic protein induced experimental allergic encephalomyelitis or EAE) in rhesus monkeys. EAE in non-treated control monkeys progressed rapidly and paralysis occurred 4-6 days after induction. In monkeys treated with anti-CD3–IT at induction, paralysis was either delayed or never occurred. These results have been achieved with a chemically-coupled reagent. Development of a molecularly enginerred anti-CD3-IT is ongoing. Anti-CD3 immunotoxin may be useful in treating T cell driven autoimmune diseases such as rheumatoid arthritis and multiple sclerosis.

ADDRESSES: Requests for copies of the patent applications, inquiries, comments and other materials relating to the contemplated licenses should be directed to: Raphe Kantor, Ph.D., Technology Licensing Specialist, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852-3804; Telephone: (301) 496-7735 ext. 247; Facsimile: (301) 402-0220. A signed Confidentiality Agreement will be required to recieve copies of the patent applications. Applications for a license in the field of use filed in response to this notice will be treated as objections to the grant of the contemplated licneses. Only written comments and/or applications for a license which are received by NIH on or before November 15, 1996 will be considered. Comments and objections submitted to this notice will not be made available for public inspection and, to the extent permitted by law, will not be released under the Freedom of Information Act, 5 U.S.C. 552.

Dated: September 6, 1996.

Barbara M. McGarey,

Deputy Director, Office of Technology Transfer.

[FR Doc. 96–23633 Filed 9–13–96; 8:45 am]

BILLING CODE 4140-01-M

Office of Public Health and Science

Announcement of Availability of Funds for Family Planning Services Grants

AGENCY: Office of Public Health and Science, HHS.

ACTION: Notice.

SUMMARY: The Office of Population Affairs announces the availability of funds for FY 1997 family planning services grant projects under the authority of Title X of the Public Health Service Act (42 U.S.C. 300 et seq.) and solicits applications for competing grant awards to serve the areas and/or populations set out below. Only applications which propose to serve the populations and/or areas listed in Table I will be acccepted for review and possible funding.

OMB Catalog of Federal Domestic Assistance 93.217

DATES: Application due dates vary. See **SUPPLEMENTARY INFORMATION** below.

ADDRESSES: Additional information may be obtained from and completed applications should be sent to the appropriate Regional Health Administrator at the address below:

Region I (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont): DHHS/ PHS Region I, John F. Kennedy Federal Building, Government Center, Room 1400, Boston, MA 02203

Region II (New Jersey, New York, Puerto Rico, Virgin Islands): DHHS/PHS Region II, 26 Federal Plaza, Room 3337, New York, NY 10278

Region III (Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, W. Virginia): DHHS/PHS Region III, 3535 Market Street, Philadelphia, PA 19101

Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, N. Carolina, S. Carolina, Tennessee): DHHS/PHS Region IV, 101 Marietta Tower, Suite 1106, Atlanta, GA 30323

Region V (Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin): DHHS/PHS Region V, 105 West Adams Street, 17th Floor, Chicago, IL 60603

Region VI (Arkansas, Louisiana, New Mexico, Oklahoma, Texas): DHHS/ PHS Region VI, 1200 Main Tower Building, Room 1800, Dallas, TX 75202

Region VII (Iowa, Kansas, Missouri, Nebraska): DHHS/PHS Region VII, 601 East 12th Street, 5th Fl. W., Kansas City, MO 64106

Region VIII (Colorado, Montana, N. Dakota, S. Dakota, Utah, Wyoming): DHHS/PHS Region VIII, 1961 Stout Street, Denver, CO 80294

Region IX (Arizona, California, Hawaii, Nevada, Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, Republic of the Marshall Islands): DHHS/PHS Region IX, 50 United Nations Plaza, Room 327, San Francisco, CA 94102

Region X (Alaska, Idaho, Oregon, Washington): DHHS/PHS Region X, Blanchard Plaza, 2201 Sixth Avenue, M/S RX–20, Seattle, WA 98121

FOR FURTHER INFORMATON CONTACT:

Regional Grants Management Officers: Region I, Mary O'Brien—617/565–1482; Region II, Manley Khaleel—212/264–4493; Region III, Marty Bree—215/596–6653; Region IV, Wayne Cutchins—404/331–2597; Region V, Elaine Smith—312/353–8700; Region VI, Joyce Bailey—214/767–3879; Region VII, Michael Rowland—816/426–5841; Region VIII, Susan A. Jaworowski—303/844–4461; Region IX, Ken Souza—415/437–8125; Region X, Jim Tipton—206/615–2473.

Regional Program Consultants for Family Planning: Region I, James Sliker—617/565–1452; Region II, Barry Gordon—212/264–2535; Region III, Louis Belmonte—215/596–6686; Region IV, Christino Rodriguez—404/331–5254; Region V, Janice Ely—312/353–1700; Region VI, Paul Smith—214/767–3072; Region VII, William S. Royster, Jr.—816/426–2924; Region VIII, John J. McCarthy, Jr.—303/844–5955; Region IX, James Hauser—415/437–8116; Region X, Sharon Schnare—206/615–2501.

SUPPLEMENTARY INFORMATION: Title X of the Public Health Service Act, 42 U.S.C. 300 et seq., authorizes the Secretary of Health and Human Services (HHS) to award grants to public or private nonprofit entities to assist in the establishment and operation of voluntary family planning projects to provide a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents). The statute requires that, to the extent practicable, entities shall encourage family participation. Also, Title X funds may not be used in programs where abortion is a method of family planning. Implementing regulations appear at 42 CFR part 59, subpart A.

On February 5, 1993, HHS published at 58 FR 7462 an interim rule that suspends the 1988 Title X rules, pending the promulgation of new regulations. The principal effect of this action was to suspend the definitions of "family planning," "grantees," "prenatal care," "Title X," "Title X Program," and "Title X Project" presently found at 42 CFR 59.2 and 42 CFR 59.7–59.10. Proposed rules were also published at 58 FR 7464 on the same date. During the pendency of rulemaking, the compliance standards that were in effect prior to the issuance of the 1988 rule, including those set out in the 1981 Family Planning Guidelines, are being used to administer the program. Copies of the pre-1988 compliance standards are available from the Regional Program Consultants listed above.

Priorities that represent overarching goals for the Title X program include:

- (1) Increasing outreach to individuals not likely to seek services, including males, homeless persons, disabled persons, substance abusers and adolescents;
- (2) Expanding the comprehensiveness of reproductive health services, including STD and cancer screening and prevention, increased involvement of

male partners, HIV prevention, education and counseling, and substance abuse screening and referral;

- (3) Serving adolescents, including more community education, emphasis on postponement of sexual activity, and more accessible provision of contraceptive counseling and contraception;
- (4) Eliminating disincentives to providing long-acting, highly effective contraceptives, serving high risk (and high-unit cost) clients, and providing nonrevenue-generating services such as community education and prevention services; and
- (5) Emphasizing training and retention of women's health nurse practitioners, particularly minority nurse practitioners and nurse practitioners serving disadvantaged and medically underserved communities.

These program priorities are being pursued to the extent that funding or increases in program efficiency allow. Some funding may be available to Title X grantees to improve and expand services.

The Administration's FY 1997 budget request for the Title X Family Planning Program is \$198 million. This amount represents a two percent increase over the FY 1996 budget of \$193.3 million. Of this amount, \$184 million will be made available to Title X service grantees. Approximately 38 percent of the funds appropriated for FY 1997 and

made available to Title X service grantees will be used for competing grants. The remaining funds will be used for non-competing continuation grants. This program announcement is subject to the appropriation of funds and is a contingency action being taken to ensure that, should funds become available for this purpose, they can be awarded in a timely fashion consistent with the needs of the program as well as to provide for the distribution of funds throughout the fiscal year. Since the precise funding levels for FY 1997 are uncertain at this point, the funding levels set out below are based on the FY 1995 appropriation level. However, it is expected that funding levels will be increased, if the appropriation for FY 1977 increases from FY 1996 levels.

For FY 1997, the proposed \$184 million will be allocated among the 10 DHHS regions for both competing and non-competing grants, and will in turn be awarded to public and private non-profit agencies located within the regions. Each regional office is responsible for evaluating applications, establishing priorities, and setting funding levels according to criteria in 42 CFR 59.11.

This notice announces the availability of funds to provide family planning services in 22 States and the Commonwealth of Puerto Rico. Competing grant applications are invited for the following areas:

TABLE I

Populations or areas to be served	Number of com- peting grants to be awarded	FY 1995 funding	Application due date	Grant fund- ing date
Region I: No grants available for competition in FY 1997				
Region II: Commonwealth of Puerto Rico	1	\$1,683,802	2/28/97	6/30/97
Region III:		.,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
West Virginia	1	1,587,483	11/30/96	3/31/97
Southeastern PA	1	3,259,606	2/28/97	6/30/97
Western PA	1	2,566,846	2/28/97	6/30/97
Central PA	1	1,954,220	2/28/97	6/30/97
Northeastern PA	1	1,185,168	2/28/97	6/30/97
Virginia	1	3,492,148	2/28/97	6/30/97
Delaware	1	647,118	11/30/96	3/31/97
Maryland	1	3,005,096	2/28/97	6/30/97
Region IV:				
Alabama	1	3,831,548	2/28/97	/6/30/97
Florida	1	6,771,384	2/28/97	6/30/97
Georgia	1	5,801,774	2/28/97	6/30/97
Kentucky	1	3,859,661	2/28/97	6/30/97
Mississippi	1	3,682,582	2/28/97	6/30/97
North Carolina	1	4,866,987	2/28/97	6/30/97
South Carolina	1	4,172,010	2/28/97	6/30/97
Tennessee	1	5,266,054	2/28/97	6/30/97
Region V:				
Illinois	1	5,860,119	8/31/96	12/31/96
Ohio	1	5,888,625	10/31/96	2/28/97
Central Ohio	1	585,238	10/31/96	2/28/97
Summit, Medina, Portage, OH	1	659,935	2/28/97	6/30/97

TABLE	I —	Cor	ntinu	ıed
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Populations or areas to be served	Number of com- peting grants to be awarded	FY 1995 funding	Application due date	Grant fund- ing date
Region VI: No grants available for competition in FY 1997 Region VII: No grants available for competition in FY 1997 Region VIII: South Dakota Wyoming Region IX: No grants available for competition in FY 1997 Region X: No grants available for competition in FY 1997	1	559,532 481,247	2/28/97 9/01/96	6/30/97 1/01/97
Total		69,488,183		

Applications must be postmarked or, if not sent by U.S. mail, received at the appropriate Grants Management Office no later than close of business on application due dates listed above. Private metered postmarks will not be acceptable as proof of timely mailing. Applications which are postmarked or, if not sent by U.S. mail, delivered to the appropriate Grants Management Office later than the application due date will be judged late and will not be accepted for review. (Applicants should request a legibly dated postmark from the U.S. Postal Service.) Applications which do not conform to the requirements of this program announcement or do not meet the applicable regulatory requirements at 42 CFR part 59, subpart A will not be accepted for review. Applicants will be so notified, and the applications will be returned.

Applications will be evaluated on the following criteria:

- (1) The number of patients and, in particular, the number of low-income patients to be served;
- (2) The extent to which family planning services are needed locally;
- (3) The relative need of the applicant; (4) The capacity of the applicant to make rapid and effective use of the Federal assistance;
- (5) The adequacy of the applicant's facilities and staff;
- (6) The relative availability of non-Federal resources within the community to be served and the degree to which those resources are committed to the project; and

(7) The degree to which the project plan adequately provides for the requirements set forth in the Title X regulations.

Application Requirements

Application kits (including the application form, PHS 5161) and technical assistance for preparing proposals are available from the regional offices. An application must contain: (1)

A narrative description of the project and the manner in which the applicant intends to conduct it in order to carry out the requirements of the law and regulations; (2) a budget that includes an estimate of project income and costs, with justification for the amount of grant funds requested; (3) a description of the standards and qualifications that will be required for all personnel and facilities to be used by the project; and (4) such other pertinent information as may be required by the Secretary as specified in the application kit. In preparing an application, applicants should respond to all applicable regulatory requirements. (The information collections contained in this notice have been approved by the Office of Management and Budget and assigned control number 0937-0189.)

The Office of Public Health and Science (OPHS) requires all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. This is consistent with the OPHS mission to protect and advance the physical and mental health of the American people.

Application Review and Evaluation

Each regional office is responsible for establishing its own review process. Applications must be submitted to the appropriate regional office at the address listed above. Staff are available to answer questions and provide limited technical assistance in the preparation of grant applications.

Grant Awards

Grant projects are generally approved for 3 to 5 years with an annual non-competitive review of a continuation application to obtain continued support. Non-competing continuation awards are subject to factors such as the project making satisfactory progress and the availability of funds. In all cases, continuation awards require a

determination by HHS that continued funding is in the best interest of the Federal Government.

Review Under Executive Order 12372

Applicants under this announcement are subject to the review requirements of Executive Order 12372, Intergovernmental Review of Department of Health and Human Services Programs and Activities, as implemented by 45 CFR part 100. As soon as possible, the applicant should discuss the project with the State Single Point of Contact (SPOC) for each State to be served. The application kit contains the currently available listing of the SPOCs which have elected to be informed of the submission of applications. For those States not represented on the listing, further inquiries should be made by the applicant regarding the submission to the Grants Management Office of the appropriate region. State Single Point of Contact comments must be received by the regional office 30 days prior to the funding date to be considered.

When final funding decisions have been made, each applicant will be notified by letter of the outcome of its application. The official document notifying an applicant that a project application has been approved for funding is the Notice of Grant Award, which specifies to the grantee the amount of money awarded, the purposes of the grant, and terms and conditions of the grant award.

Dated: September 5, 1996.

Thomas C. Kring,

Acting Deputy Assistant Secretary for Population Affairs.

[FR Doc. 96–23553 Filed 9–13–96; 8:45 am] BILLING CODE 4160–17–M