

comment is being made pursuant to the Paperwork Reduction Act of 1995 (Pub. L. 104-13; 44 U.S.C. 3506(c)(2)(A)). Comments should address the accuracy of the burden estimates and ways to minimize the burden including the use of automated collection techniques or the use of other forms of information technology, as well as other relevant aspects of the information collection.

**DATES:** Written comments and recommendations on the proposal for the collection of information should be on or before February 10, 1997.

**ADDRESSES:** Direct all written comments to Nancy J. Kessinger, Veterans Benefits Administration (20S52), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420. All comments will become a matter of public record and will be summarized in the VBA request for Office of Management and Budget (OMB) approval. In this document VBA is soliciting comments concerning the following information collection:

*OMB Control Number:* 2900-0002.

*Title and Form Number:* Income-Net Worth and Employment Statement, VA Form 21-527.

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

*Need and Uses:* The form is used by the claimant to submit a supplemental claim for disability pension or disability compensation based on individual unemployability. The information is necessary to determine eligibility to these benefits. The form is being revised to request additional information for purposes of Electronic Funds Transfer (EFT).

*Current Actions:* The information is used by the VBA to determine eligibility and benefit rates for veterans' disability pension and compensation based on individual unemployability.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 104,440 hours.

*Estimated Average Burden Per Respondent:* 60 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 104,440.

**FOR FURTHER INFORMATION CONTACT:** Requests for additional information or copies of the form should be directed to Department of Veterans Affairs, Attn: Nancy J. Kessinger, Veterans Benefits Administration (20S52), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, Telephone (202) 273-7079 or FAX (202) 275-4884.

Dated: November 26, 1996.

By direction of the Secretary.

Donald L. Neilson,

*Director, Information Management Service.*

[FR Doc. 96-31506 Filed 12-11-96; 8:45 am]

BILLING CODE 8320-01-P

### **Proposed Information Collection Activity; Public Comment Request**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** As part of its continuing effort to reduce paperwork and respondent burden, Veterans Benefits Administration (VBA) invites the general public and other Federal agencies to comment on this information collection. This request for comment is being made pursuant to the Paperwork Reduction Act of 1995 (Pub. L. 104-13; 44 U.S.C. 3506(c)(2)(A)). Comments should address the accuracy of the burden estimates and ways to minimize the burden including the use of automated collection techniques or the use of other forms of information technology, as well as other relevant aspects of the information collection.

**DATES:** Written comments and recommendations on the proposal for the collection of information should be received on or before February 10, 1997.

**ADDRESSES:** Direct all written comments to Nancy J. Kessinger, Veterans Benefits Administration (20S52), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420. All comments will become a matter of public record and will be summarized in the VBA request for Office of Management and Budget (OMB) approval. In this document VBA is soliciting comments concerning the following information collection:

*OMB Control Number:* 2900-0209.

*Title and Form Number:* Application for Work-Study Allowance, VA Form 22-8691.

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

*Need and Uses:* The form is needed to identify those veteran-students who wish to apply for the supplemental VA work-study allowance and to assist VA in selecting eligible applicants.

*Current Actions:* The information solicited on the form is necessary to identify and select eligible veterans, selected reservists, and survivors or dependents to receive work-study benefits.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 4,641 hours.

*Estimated Average Burden Per Respondent:* 15 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 27,848.

### **FOR FURTHER INFORMATION CONTACT:**

Requests for additional information or copies of the form should be directed to Department of Veterans Affairs, Attn: Nancy J. Kessinger, Veterans Benefits Administration (20S52), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, Telephone (202) 273-7079 or FAX (202) 275-4884.

Dated: November 26, 1996.

By direction of the Secretary.

Donald L. Neilson,

*Director, Information Management Service.*

[FR Doc. 96-31507 Filed 12-11-96; 8:45 am]

BILLING CODE 8320-01-P

### **Agency Information Collection: Submission for OMB Review; Comment Request**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*OMB Control Number:* 2900-0086.

*Title and Form Number:* Request for Determination of Eligibility and Available Loan Guaranty Entitlement, VA Form 26-1880.

*Type of Review:* Reinstatement, without change, of a previously approved collection for which approval has expired.

*Need and Uses:* The form is completed by an applicant to establish eligibility for Loan Guaranty benefits, request restoration of entitlement previously used, or request a duplicate Certificate of Eligibility due to the original being lost or stolen. The information furnished on the form is necessary for the VBA to make a determination on whether or not the applicant is eligible for Loan Guaranty benefits.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 117,093 hours.

*Estimated Average Burden Per Respondent:* 15 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 468,372.

**ADDRESSES:** A copy of this submission may be obtained from Ron Taylor, VA Clearance Officer (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, (202) 273-8015.

Comments and recommendations concerning this submission should be directed to VA's OMB Desk Officer, Allison Eydt, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-4650. DO NOT send requests for benefits to this address.

**DATES:** Comments on the information collection should be directed to the OMB Desk Officer on or before January 13, 1997.

**FOR FURTHER INFORMATION CONTACT:** Ron Taylor, VA Clearance Officer (045A4), (202) 273-8015.

Dated: November 26, 1996.

By direction of the Secretary.

Donald L. Neilson,

*Director, Information Management Service.*

[FR Doc. 96-31508 Filed 12-11-96; 8:45 am]

BILLING CODE 8320-01-P

#### **Agency Information Collection: Submission for OMB Review; Comment Request**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*OMB Control Number:* 2900-0236.

*Title and Form Number:* Application for Education Loan, VA Form 22-8725.

*Type of Review:* Reinstatement, without change, of a previously approved collection for which approval has expired.

*Need and Uses:* This form requests information needed to determine eligibility for an education loan. A complete report of the applicant's financial resources and education-related expenses is required to compute the amount of an education loan.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 33 hours.

*Estimated Average Burden Per*

*Respondent:* 40 minutes per application.

*Frequency of Response:* Annually.

*Estimated Number of Respondents:* 50.

**ADDRESSES:** A copy of this submission may be obtained from Ron Taylor, VA Clearance Officer (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, (202) 273-8015.

Comments and recommendations concerning this submission should be directed to VA's OMB Desk Officer, Allison Eydt, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-4650. Do not send requests for benefits to this address.

**DATES:** Comments on the information collection should be directed to the OMB Desk Officer on or before January 13, 1997.

**FOR FURTHER INFORMATION CONTACT:** Ron Taylor, VA Clearance Officer (045A4), (202) 273-8015.

Dated: November 26, 1996.

By direction of the Secretary.

Donald L. Neilson,

*Director, Information Management Service.*

[FR Doc. 96-31509 Filed 12-11-96; 8:45 am]

BILLING CODE 8320-01-P

#### **Agency Information Collection: Submission for OMB Review; Comment Request**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*OMB Control Number:* 2900-0089.

*Title and Form Number:* Statement of Dependency of Parents, VA Form 21-509.

*Type of Review:* Reinstatement, without change, for a previously approved collection for which approval has expired.

*Need and Uses:* The form is used to gather the necessary information needed to determine eligibility to benefits for dependent parents. Without the information, it would not be possible for the VBA to authorize benefits to or for dependent parents.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 20,000 hours.

*Estimated Average Burden Per Respondent:* 30 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 40,000.

**ADDRESSES:** A copy of this submission may be obtained from Ron Taylor, VA Clearance Officer (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 273-8015.

Comments and recommendations concerning this submission should be directed to VA's OMB Desk Officer, Allison Eydt, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-4650. Do not send requests for benefits to this address.

**DATES:** Comments on the information collection should be directed to the OMB Desk Officer on or before January 13, 1997.

**FOR FURTHER INFORMATION CONTACT:** Ron Taylor, VA Clearance Officer (045A4), (202) 273-8015.

Dated: November 26, 1996.

By direction of the Secretary.

Donald L. Neilson,

*Director Information Management Service.*

[FR Doc. 96-31510 Filed 12-11-96; 8:45 am]

BILLING CODE 8320-01-P

#### **Agency Information Collection: Submission for OMB Review; Comment Request**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Benefits Administration (VBA), Department of Veterans Affairs, has submitted to the Office of Management and Budget (OMB) the following proposal for the collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*OMB Control Number:* 2900-0176.

*Title and Form Number:* Monthly Record of Training and Wages, VA Form 20-1905c.

*Type of Review:* Reinstatement, with change, of a previously approved collection for which approval has expired.

*Need and Uses:* The requested information is used to verify the training history and to determine the continuing entitlement to benefits. The form reports the number of hours spent each month on each unit of training.

*Affected Public:* Business or other for-profit, individuals or households, and not-for-profit institutions.

*Estimated Annual Burden:* 3,000 hours.