

that the grant of the license would not be consistent with the requirements of 35 U.S.C. 209 and 37 CFR 404.7.

Properly filed competing applications for a license filed in response to this notice will be treated as objections to the contemplated license. Comments and objections submitted in response 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: July 12, 2000.

**Jack Spiegel,**

*Director, Division of Technology,  
Development and Transfer, Office of  
Technology Transfer.*

[FR Doc. 00-18179 Filed 7-18-00; 8:45 am]

**BILLING CODE 4140-01-M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Fiscal Year (FY) 2000 Funding Opportunities

**AGENCY:** Substance Abuse and Mental Health Services Administration, HHS.

**ACTION:** Notice of funding availability.

**SUMMARY:** The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP), Center for Substance Abuse Treatment (CSAT), and Center for Mental Health Services (CMHS) announce the availability of FY 2000 funds for grants for the following

activity. This activity is discussed in more detail under Section 4 of this notice. This notice is not a complete description of the activity; potential applicants *must* obtain a copy of Parts I and II of the Guidance for Applicants (GFA) before preparing an application. Part I is entitled National Community Collaborative Involvement in Reducing Racial and Ethnic in Mental Health and/or Substance Abuse Service Disparities Cooperative Agreement. Part II is entitled General Policies and Procedures Applicable to all SAMHSA Applications for Discretionary Grants and Cooperative Agreements.

Activity	Application deadline	Estimated funds available, FY 2000 (in millions)	Estimated number of awards	Project period
Community disparities .....	8/29/00	\$1.6	45	3 years.

The actual amount available for awards and their allocation may vary, depending on unanticipated program requirements and the number and quality of applications received. FY 2000 funds for the activity discussed in this announcement were appropriated by the Congress under Public Law No. 106-113. SAMHSA's policies and procedures for peer review and Advisory Council review of grant and cooperative agreement applications were published in the **Federal Register** (Vol. 58, No. 126) on July 2, 1993.

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 for setting priority areas. The SAMHSA Centers' substance abuse and mental health services activities address issues related to Healthy People 2000 objectives of Mental Health and Mental Disorders; Alcohol and Other Drugs; Clinical Preventive Services; HIV Infection; and Surveillance and Data Systems. Potential applicants may obtain a copy of Healthy People 2000 (Full Report: Stock No. 017-001-00474-0) or Summary Report: Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9325 (Telephone: 202-512-1800).

SAMHSA has published additional notices of available funding opportunities for FY 2000 in past issues of the **Federal Register**.

**General Instructions:** Applicants must use application form PHS 5161-1 (Rev. 6/99; OMB No. 0920-0428). The application kit contains the two-part application materials (complete programmatic guidance and instructions for preparing and submitting applications), the PHS 5161-1 which includes Standard Form 424 (Face Page), and other documentation and forms. Application kits may be obtained from the organizations specified for the activity covered by this notice (see Section 4).

When requesting an application kit, the applicant must specify the particular activity for which detailed information is desired. This is to ensure receipt of all necessary forms and information, including any specific program review and award criteria.

The PHS 5161-1 application form and the full text of the activity described in Section 4 are also available electronically via SAMHSA's World Wide Web Home Page (address: <http://www.samhsa.gov>).

**Application Submission:** Applications must be submitted to: SAMHSA Programs, Center for Scientific Review, National Institutes of Health, Suite 1040, 6701 Rockledge Drive MSC-7710, Bethesda, Maryland 20892-7710\*. (\* Applicants who wish to use express mail or courier service should change the zip code to 20817.)

**Application Deadlines:** The deadline for receipt of applications is August 29, 2000.

Competing applications must be received by the indicated receipt date to be accepted for review. An application received after the deadline may only be accepted if it carries a legible proof-of-mailing date assigned by the carrier and that date is not later than one week prior to the deadline date. Private metered postmarks are not acceptable as proof of timely mailing.

Applications received after the deadline date and those sent to an address other than the address specified above will be returned to the applicant without review.

**FOR FURTHER INFORMATION CONTACT:** Requests for activity-specific technical information should be directed to the program contact person identified for the activity covered by this notice (see Section 4).

Requests for information concerning business management issues should be directed to the grants management contact person identified for the activity covered by this notice (see Section 4).

### Programmatic Information

#### 1. Program Background and Objectives

SAMHSA's mission within the Nation's health system is to improve the quality and availability of prevention, early intervention, treatment, and rehabilitation services for substance abuse and mental illnesses, including co-occurring disorders, in order to improve health and reduce illness, death, disability, and cost to society.

Reinventing government, with its emphases on redefining the role of Federal agencies and on improving customer service, has provided SAMHSA with a welcome opportunity to examine carefully its programs and activities. As a result of that process, SAMHSA moved assertively to create a renewed and strategic emphasis on using its resources to generate knowledge about ways to improve the prevention and treatment of substance abuse and mental illness and to work with State and local governments as well as providers, families, and consumers to effectively use that knowledge in everyday practice.

SAMHSA's FY 2000 Knowledge Development and Application (KD&A) agenda is the outcome of a process whereby providers, services researchers, consumers, National Advisory Council members and other interested persons participated in special meetings or responded to calls for suggestions and reactions. From this input, each SAMHSA Center developed a "menu" of suggested topics. The topics were discussed jointly and an agency agenda of critical topics was agreed to. The selection of topics depended heavily on policy importance and on the existence of adequate research and practitioner experience on which to base studies. While SAMHSA's FY 2000 KD&A program will sometimes involve the evaluation of some delivery of services, they are services studies and application activities, not merely evaluation, since they are aimed at answering policy-relevant questions and putting that knowledge to use.

SAMHSA differs from other agencies in focusing on needed information at the services delivery level, and it is question-focus. Dissemination and application are integral, major features of the programs. SAMHSA believes that it is important to get the information into the hands of the public, providers, and systems administrators as effectively as possible. Technical assistance, training, and preparation of special materials will be used, in addition to normal communication means.

SAMHSA also continues to fund legislatively-mandated services programs for which funds are appropriated.

## 2. Special Concerns

SAMHSA's legislatively-mandated services programs do provide funds for mental health and/or substance abuse treatment and prevention services. However, SAMHSA's KD&A activities do not provide funds for mental health and/or substance abuse treatment and prevention services except sometimes

for costs required by the particular activity's study design. Applicants are required to propose true knowledge application or knowledge development application projects. Applications seeking funding for services projects under a KD&A activity will be considered nonresponsive.

Applications that are incomplete or nonresponsive to the GFA will be returned to the applicant without further consideration.

## 3. Criteria for Review and Funding

### 3.1 General Review Criteria

Review criteria that will be used by the peer review groups are specified in the application guidance material.

### 3.2 Funding Criteria for Scored Applications

Applications will be considered for funding on the basis of their overall technical merit as determined through the peer review group and the appropriate National Advisory Council review process. Availability of funds will also be an award criteria. Additional award criteria specific to the programmatic activity may be included in the application guidance materials.

## 4. Special FY 2000 SAMHSA Activities

National Community Collaborative Involvement in Reducing Racial and Ethnic in Mental Health and/or Substance Abuse Service Disparities Cooperative Agreement (short title: Community Disparities, SP00-007)

- *Application Deadline:* The receipt date is August 29, 2000.

- *Purpose:* The Substance Abuse and Mental Health Services Administration's CSAP, CSAT, and CMHS announce the availability of funds for a knowledge development and application (KD&A) cooperative agreement to capitalize on the collaborative strength of racial/ethnic communities to address disparities in access to substance abuse prevention, treatment and mental health services they may experience. This mental health and/or substance abuse prevention or treatment initiative is intended to achieve those goals by employing existing racial/ethnic focused national and/or regional organizations and their collaborating affiliates to increase awareness, to develop/adapt programs, and/or to evaluate current models for specific populations with particular disparate issues. The involvement of national and/or regional organizations (whose existing infrastructure and experience give them both the management experience and target population base needed) will assure the applicant is well known to, and respected by, its

respective constituency(s) and will facilitate access to these racial/ethnic communities through either their local community-based affiliates or other non-affiliated local organizations willing to quickly join in collaboration in order to ensure culturally competent, effective and timely strategies to reduce service disparities.

- *Eligible Applicants:* Applications may only be submitted by national or regional domestic non-profit organizations that can demonstrate collaborative relationships with community based organizations that are based in racial/ethnic minority communities which are capable of achieving the program design/approach and prepared to enter into contractual agreement for the purpose of this GFA with the national/regional organization. Applicants and collaboratives must be culturally competent to address the specialized needs of one of the target population groups listed below. Examples of suitable collaboratives may include local affiliates, chapters, community-based organizations, faith-based groups, and Indian tribes or tribal organizations, etc. Target populations are: Alaska Natives, African Americans, Asian Americans, Hispanic/Latinos, American Indians, and/or Native Hawaiians, and Pacific Islanders.

- *Amount:* SAMHSA is making \$1.6 million available to support approximately four to five awards under this GFA in FY2000. The average award is expected to range from \$200,000 to \$400,000 in total costs (direct plus indirect costs). The awardee will only be entitled to actual cost or 20%, whichever is less for administering sub-awards and providing program management. The applicant is expected to administer at least 4 sub-awards to local organizations. Actual funding levels will depend upon the availability of appropriated funds.

- *Period of Support:* Support may be requested for a period of up to 3 years.

- *Catalog of Federal Domestic Assistance Number:* 93.230.

- *Program Contact:* For questions concerning program issues, contact: Laura J. Flinchbaugh, MPH, Division of Knowledge Development and Evaluation, Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, Rockwall II, Room 1075, 5600 Fishers Lane, Rockville, MD 20857, (301) 443-4564.

For questions regarding grants management issues, contact: Edna Frazier, Grants Management Officer, Division of Grants Management, OPS, Substance Abuse and Mental Health Services Administration, Rockwall II,

Suite 630, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443-6816.

- Application kits are available from: National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, MD 20847, Telephone: 1-800-729-6686, TDD: (800) 487-4889, Fax: (301) 468-6433 and/or

Knowledge Exchange Network (KEN), P.O. Box 42490, Washington, DC 20015, Telephone: 1-800-789-2647, TTY: (301) 443-9006, Fax: (301) 984-8796.

#### 5. Public Health System Reporting Requirements

The Public Health System Impact Statement (PHSIS) is intended to keep State and local health officials apprised of proposed health services grant and cooperative agreement applications submitted by community-based nongovernmental organizations within their jurisdictions.

Community-based nongovernmental service providers who are not transmitting their applications through the State must submit a PHSIS to the head(s) of the appropriate State and local health agencies in the area(s) to be affected not later than the pertinent receipt date for applications. This PHSIS consists of the following information:

- a. A copy of the face page of the application (Standard form 424).
- b. A summary of the project (PHSIS), not to exceed one page, which provides:
  - (1) A description of the population to be served.
  - (2) A summary of the services to be provided.
  - (3) A description of the coordination planned with the appropriate State or local health agencies.

State and local governments and Indian Tribal Authority applicants are not subject to the Public Health System Reporting Requirements.

Application guidance materials will specify if a particular FY 2000 activity is subject to the Public Health System Reporting Requirements.

#### 6. PHS Non-Use of Tobacco Policy Statement

The PHS strongly encourages all grant and contract recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care, or early childhood development services are provided to

children. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

#### 7. Executive Order 12372

Applications submitted in response to the FY 2000 activity listed above are subject to the intergovernmental review requirements of Executive Order 12372, as implemented through DHHS regulations at 45 CFR part 100. E.O. 12372 sets up a system for State and local government review of applications for Federal financial assistance. Applicants (other than Federally recognized Indian tribal governments) should contact the State's Single Point of Contact (SPOC) as early as possible to alert them to the prospective application(s) and to receive any necessary instructions on the State's review process. For proposed projects serving more than one State, the applicant is advised to contact the SPOC of each affected State. A current listing of SPOCs is included in the application guidance materials. The SPOC should send any State review process recommendations directly to:

Division of Extramural Activities, Policy, and Review Substance Abuse and Mental Health Services Administration, Parklawn Building, Room 17-89, 5600 Fishers Lane, Rockville, Maryland 20857.

The due date for State review process recommendations is no later than 60 days after the specified deadline date for the receipt of applications. SAMHSA does not guarantee to accommodate or explain SPOC comments that are received after the 60-day cut-off.

Dated: July 13, 2000.

**Richard Kopanda,**  
Executive Officer, SAMHSA.

[FR Doc. 00-18149 Filed 7-18-00; 8:45 am]

BILLING CODE 4162-20-P

#### DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4566-N-09]

##### Announcement of OMB Approval Number for the Continuum of Care Homeless Assistance Application

**AGENCY:** Office of the Assistant Secretary for Community Planning and Development, HUD.

**ACTION:** Announcement of OMB approval number.

**SUMMARY:** The purpose of this notice is to announce the OMB approval number for the collection of information

pertaining to the Continuum of Care Homeless Assistance Application.

**FOR FURTHER INFORMATION CONTACT:** Alma Thomas, Department of Housing and Urban Development, 451, 7th Street, Southwest, Washington, DC 20410, telephone (202) 708-21240. This is not a toll-free number.

**SUPPLEMENTARY INFORMATION:** In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35, as amended), this notice advises that OMB has responded to the Department's request for approval of the information collection pertaining to the Continuum of Care Homeless Assistance Application. The OMB approval number for this information collection is 2506-0112, which expires on June 30, 2003.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information, unless it displays a currently valid OMB control number.

Dated: July 13, 2000.

**Joseph D'Agosta,**  
General Deputy Assistant Secretary for Community Planning and Development.  
[FR Doc. 00-18161 Filed 7-18-00; 8:45 am]

BILLING CODE 4210-29-M

#### DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4566-N-10]

##### Announcement of OMB Approval Number for the Consolidated Plan

**AGENCY:** Office of the Assistant Secretary for Community Planning and Development, HUD.

**ACTION:** Announcement of OMB approval number.

**SUMMARY:** The purpose of this notice is to announce the OMB approval number for the collection of information pertaining to the Consolidated Plan.

**FOR FURTHER INFORMATION CONTACT:** Sal Sclafani, Department of Housing and Urban Development, 451 7th Street, SW., Washington, DC 20410, telephone (202) 708-1283. This is not a toll-free number.

**SUPPLEMENTARY INFORMATION:** In accordance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35, as amended), this notice advises that OMB has responded to the Department's request for approval of the information collection pertaining to the Consolidated Plan. The OMB approval number for this information collection is 2506-0117, which expires on June 30, 2002.

An agency may not conduct or sponsor, and a person is not required to