

AmeriCorps members spearheading community efforts to provide young people with five basic promises:

- Ongoing relationships with caring adults—parents, mentors, tutors or coaches;
- Safe places with structured activities during nonschool hours;
- Healthy start and future;
- Marketable skills through effective education; and
- Opportunities to give back through community service.

The 2001 AmeriCorps Promise Fellows Application Instructions provide the requirements, instructions and forms that eligible applicants need to complete an application to the Corporation for funding.

The Corporation seeks public comment on the forms, the instructions for the forms, and the instructions for the narrative portion of these application instructions.

*Type of Review:* New collection.

*Agency:* Corporation for National and Community Service.

*Title:* 2001 AmeriCorps Promise Fellows Application Instructions.

*OMB Number:* None.

*Agency Number:* None.

*Affected Public:* Governor-appointed state commissions on national and community service (State Commissions); nonprofit organizations proposing to sponsor AmeriCorps Promise Fellows in more than one state; Indian Tribes; and local government agencies, institutions of higher education, or public or private nonprofit organizations in states or U.S. territories that do not have a State Commission.

*Total Respondents:* 90.

*Frequency:* Once per year.

*Average Time Per Response:* 28 hours.

*Estimated Total Burden Hours:* 2,520 hours.

*Total Burden Cost (capital/startup):* None.

*Total Burden Cost (operating/maintenance):* None.

#### Technical Assistance Call

The Corporation will host a conference call to provide technical assistance regarding the 2001 AmeriCorps Promise Fellows Application Instructions. The primary purpose of these calls is to offer technical assistance to interested applicants to the program. The call will occur on Wednesday, March 21, 2001, at 2 p.m. Eastern time. To register for this call, please contact Austin Holland at (202) 606-5000, extension 274 or [aholland@cns.gov](mailto:aholland@cns.gov) to receive the information you need to join the call.

Dated: February 28, 2001.

**Tracy Stone,**

*Director, AmeriCorps Promise Fellows.*

[FR Doc. 01-5312 Filed 3-5-01; 8:45 am]

**BILLING CODE 6050--\$-P**

## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### Proposed Collection; Comment Request

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs, Defense.

**ACTION:** Notice.

In accordance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Assistant Secretary of Defense for Health Affairs/TRICARE Management Activity announces a proposed new public health information collection and seeks public comment on the provisions thereof. Comments are invited on: (a) Whether the proposed new collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the information collection; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and, (d) ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology.

**DATES:** Consideration will be given to all comments received on or before May 1, 2001.

**ADDRESSES:** Written comments and recommendations on the information collection should be sent to the TRICARE Management Activity (Optimization & Integration), Attention: LTC Scott Goodrich, MC, USA, Deputy Director, Population Health Programs, 5111 Leesburg Pike, Suite 810, Falls Church, VA 22041-3206.

**FOR FURTHER INFORMATION CONTACT:** To request more information on this proposed information collection, please write to the above address.

*Title; Associated Form; and OMB Number:* Health Evaluation Assessment Review (HEAR) Survey 2.X.

*Needs and Uses:* The objective of this work is to design and implement the HEAR 2.X. The HEAR is a tool that will help to define the health status of a population. The survey is a self-reported health assessment tool designed to

provide information regarding: (1) An individual's health risk factors and preventive care needs. These are reported to both the individual and their primary care manager; (2) which individuals are likely to use high levels of medical resources; and, (3) risk factors, care levels, and healthcare utilization for use in strategic planning for population health management and resource utilization at the Office of the Assistant Secretary of Defense (Health Affairs), TRICARE Management Activity, Regional, Major Command, Military Treatment Facility, and provider level healthcare. In addition, the HEAR 2.X will provide information in support of Healthy People 2010 and other population health programs. These data will provide needed information to better plan, deliver, and evaluate health care provided in the Military Health System.

*Affected Public:* Individual households.

*Annual Burden Hours:* 703,427.71 hours.

*Number of Respondents:* 2,106,071.

*Responses per Respondent:* 1 each year.

*Average Burden per Response:* 20 Minutes (0.334).

*Frequency:* Once.

#### SUPPLEMENTARY INFORMATION:

##### Summary of Information Collection

This request encompasses all activities required to develop and implement the HEAR 2.X survey. The HEAR is a unified approach to assess health and fitness for active duty and other DoD health care beneficiaries. The information is primarily used by health care personnel to plan health care delivery needs and to: (1) Identify patients requiring clinical preventive care (e.g., cholesterol screening, mammography, prostate exam, etc.); (2) target individuals who could benefit from counseling services associated with high risk behaviors (e.g., excessive alcohol consumption, smoking, drinking and driving, etc.); (3) categorize patients into one of three primary care levels according to the complexity and intensity of care required; (4) predict which patients will be high users of health care resources; (5) empower individuals to take responsibility for their own health; and, (6) assess the health status of the population so patients, providers, resource managers, commanders, and health planners at all levels can work towards improving health and managing care.

Dated: February 27, 2001.

**Patricia L. Toppings,**

*Alternate OSD Federal Register Liaison  
Officer, Department of Defense.*

[FR Doc. 01-5382 Filed 3-5-01; 8:45 am]

**BILLING CODE 5001-10-M**

## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### Submission for OMB Review; Comment Request

**ACTION:** Notice.

The Department of Defense has submitted to OMB for clearance, the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*Title and OMB Number:* Interactive Customer Evaluation System (ICE); OMB Number 0704-[To Be Determined].

*Type of Request:* New Collection.

*Number of Respondents:* 2,880.

*Responses Per Respondent:* 1.

*Annual Responses:* 2,880.

*Average Burden Per Response:* 3 minutes.

*Annual Burden Hours:* 144.

*Needs and Uses:* Members of the public who respond to this interactive customer evaluation system are authorized customers and have been provided a service through DoD customer service organizations. They have the opportunity to give automated feedback to the service provider on the quality of their experience and their satisfaction level. Customers also have the opportunity to provide any comments that might be beneficial in improving the process and in turn service to the customer. This is a management tool for improving customer services.

*Affected Public:* Individuals or Households; Business or Other For-Profit.

*Frequency:* On Occasion.

*Respondent's Obligation:* Voluntary.

*OMB Desk Officer:* Mr. Edward C. Springer. Written comments and recommendations on the proposed information collection should be sent to Mr. Springer at the Office of Management and Budget, Desk Officer for DoD, Room 10236, New Executive Office Building, Washington, DC 20503.

*DOD Clearance Officer:* Mr. Robert Cushing. Written requests for copies of the information collection proposal should be sent to Mr. Cushing, WHS/DIOR, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302.

Dated: February 27, 2001.

**Patricia L. Toppings,**

*Alternate OSD Federal Register Liaison  
Officer, Department of Defense.*

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**BILLING CODE 5001-10-M**

## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### Submission for OMB Review; Comment Request

**ACTION:** Notice.

The Department of Defense has submitted to OMB for clearance, the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*Title, Form, and OMB Number:* Request for Information Regarding Deceased Debtor; DD Form 2840; OMB Number 0730-[To Be Determined].

*Type of Request:* New Collection.

*Number of Respondents:* 10,000.

*Responses per Respondent:* 1.

*Annual Responses:* 10,000.

*Average Burden per Response:* 5 minutes.

*Annual Burden Hours:* 833.

*Needs and Uses:* Defense Finance and Accounting Service maintains updated debt accounts and initiates debt collection action for separated military members, out-of-service civilian employees, and other individuals not on an active federal government payroll system. When notice is received that an individual debtor is deceased, an effort is made to ascertain whether the decedent left an estate by contacting clerks of probate courts. If it is determined that an estate was established, attempts are made to collect the debt from the estate. If no estate appears to have been established, the debt is written off as uncollectable. This form is used to obtain information on deceased debtors from probate courts.

*Affected Public:* Individuals or Households; State, Local or Tribal Government.

*Frequency:* On Occasion.

*Respondent's Obligation:* Voluntary.

*OMB Desk Officer:* Mr. Edward C. Springer. Written comments and recommendations on the proposed information collection should be sent to Mr. Springer at the Office of Management and Budget, Desk Officer for DoD, Room 10236, New Executive Office Building, Washington, DC 20503.

*DOD Clearance Officer:* Mr. Robert Cushing. Written requests for copies of the information collection proposal should be sent to Mr. Cushing, WHS/

DIOR, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302.

Dated: February 27, 2001.

**Patricia L. Toppings,**

*Alternate OSD Federal Register Liaison  
Officer, Department of Defense.*

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**BILLING CODE 5001-10-M**

## DEPARTMENT OF DEFENSE

### Office of the Secretary

#### Submission for OMB Review; Comment Request

**ACTION:** Notice.

The Department of Defense has submitted to OMB for clearance, the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. Chapter 35).

*Title, Forms, and OMB Number:* Dependency Statement—Parent, Child Born Out of Wedlock, Incapacitated Child Over Age 21, Full Time Student 21-22 Years of Age, and Ward of a Court; DD Forms 137-3, 137-4, 137-5, 137-6, 137-7; OMB Number 0730-[To Be Determined].

*Type of Request:* New Collection.

*Number of Respondents:* 19,440.

*Responses per Respondent:* 1.

*Annual Responses:* 19,440.

*Average Burden per Response:* 1.25 hours.

*Annual Burden Hours:* 24,300.

*Needs and Uses:* The information collection requirement is necessary to certify dependency or obtain information to determine entitlement to basic allowance for housing (BAH) with dependent rate, travel allowance, or Uniformed Services Identification and Privilege Card. Information regarding a parent, a child born out-of-wedlock, an incapacitated child over age 21, a student 21-22, or a ward of a court is provided by the military member or by another individual who may be a member of the public. Pursuant to 37 U.S.C. 401, 403, 406, and 10 U.S.C. 1072 and 1076, the member must provide at least one-half of the claimed child's monthly expenses. DoDFMR 7000.14, Vol. 7A, defines dependency and directs that dependency be proven. Dependency claim examiners use the information from these forms to determine the degree of benefits. The requirement to provide the information decreases the possibility of monetary allowances being approved on behalf of ineligible dependents.

*Affected Public:* Individuals or Households.