

responsibilities that will be undertaken by the coalition members and community organizations should be included in the appendix.

5. Proposed Budget Justification (Reviewed, but not scored)

The extent to which the applicant's budget includes funds to participate in the CDC required meetings (at least one person, such as the Project Coordinator, must attend one meeting per year in Atlanta to last for two days). The applicant should provide a detailed budget request and complete line-item justification of all proposed operating expenses consistent with the stated activities under this program announcement. Applicants should be precise about the purpose of each budget item and should itemize calculations wherever appropriate. The use of budget guidance posted on the CDC website with this announcement is encouraged.

6. Measures of Effectiveness (Reviewed, but not scored)

The extent to which the applicant has provided appropriate measures of effectiveness.

7. Human Subjects (Reviewed, but not scored)

The extent to which the applicant adequately addresses the requirements of Title 45 CFR part 46 for the protection of human subjects. Not scored; however, an application can be disapproved if the research risks are sufficiently serious and protection against risks is so inadequate as to make the entire application unacceptable.

I. Other Requirements

Technical Reporting Requirements

Provide CDC with original plus two copies of:

1. Interim progress report, no less than 90 days before the end of the budget period. The progress report will serve as your non-competing continuation application, and must contain the following elements:
 - a. Current Budget Period Activities Objectives.
 - b. Current Budget Period Financial Progress.
 - c. New Budget Period Program Proposed Activity Objectives.
 - d. Detailed Line-Item Budget and Justification.
 - e. Additional Requested Information.
2. Financial status report, no more than 90 days after the end of the budget period.
3. Final financial and performance reports, no more than 90 days after the end of the project period. Send all

reports to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

Additional Requirements

The following additional requirements are applicable to this program. For a complete description of each, see Attachment III of the program announcement, as posted on the CDC Web site.

- AR-1 Human Subjects Requirements
- AR-7 Executive Order 12372 Review
- AR-8 Public Health System Reporting Requirements
- AR-9 Paperwork Reduction Act Requirements
- AR-10 Smoke-Free Workplace Requirements
- AR-11 Healthy People 2010
- AR-12 Lobbying Restrictions
- AR-13 Prohibition on Use of CDC Funds for Certain Gun Control Activities

J. Where To Obtain Additional Information

This and other CDC announcements, the necessary applications, and associated forms can be found on the CDC web site, Internet address: <http://www.cdc.gov>. Click on "Funding," then "Grants and Cooperative Agreements".

For general questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: 770-488-2700.

For business management and budget assistance, contact: Nancy Pillar, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341-4146, Telephone number: 770-488-2721, e-mail address: nfp6@cdc.gov.

For program technical assistance, contact: David Wallace, MSEH, Technical Adviser, National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 4770 Buford Highway NE, MS K-63, Atlanta, GA 30341-3724, Telephone number: 770-488-4712, e-mail address: dwallace2@cdc.gov.

Dated: July 2, 2003.

Edward Schultz,

Acting Director, Procurement and Grants Office, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 03189]

Blindness and Vision Loss Prevention Program; Notice of Availability of Funds

Application Deadline: August 18, 2003.

A. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under section 301 (a) and 317(k)(2) of the Public Health Service Act, 317H of the Public Health Service Act 42 U.S.C. 247 (b)(9), and section 301(a) of the Public Health Service Act, 42 U.S.C. 241(a) and 247b(k)(2), as amended. The Catalog of Federal Domestic Assistance number is 93.988.

B. Purpose

The Centers for Disease Control and Prevention (CDC), announces the availability of fiscal year (FY) 2003 funds for a cooperative agreement program for a Blindness and Vision Loss Prevention Program. This program addresses the "Healthy People 2010" focus area of Diabetes and Vision.

The purpose of this program is to develop, deliver, and evaluate a program of comprehensive vision screening, outreach and referral, public education, and surveillance of vision problems. This program is intended to serve persons at risk of blindness and vision loss including persons with diabetes, the elderly, racial and ethnic minorities, and children. This program is also intended to increase awareness nationwide of the need for routine eye examinations, screenings for vision loss, and the need for action to preserve and protect eyesight by developing a national model prevention program to: (a) Raise awareness of the risks of vision loss and eye disease; (b) recognize the early signs of eye disease; (c) identify appropriate and effective prevention practices; (d) implement screenings and eye examinations in target populations; (e) locate and identify where to find services for prevention, treatment, and rehabilitation; and (f) develop and maintain a national database which defines the extent of eye disease and vision loss.

Measurable outcomes of the program will be in alignment with the following performance goal for the National Center for Chronic Disease Prevention and Health Promotion: Increase the capacity of state diabetes control