

for drivers convicted of DWI is administered along with other license sanctions (e.g., license suspension). Participation in the State's MSAAP does not result in less severe sentencing. This combination of substance abuse assessment and treatment with strict license sanctions is considered the preferred approach to administering such a program; therefore, it is particularly important to determine the effectiveness of such a program.

3. During 1988 and 1989, North Carolina pilot-tested the use of the MSAAP for all first offenders in 10 counties. Consequently, there has been sufficient time since then to evaluate the long-term effect of the program on the driving behavior of program participants.

4. The Injury Control Program in the NCDEHNR was recently involved in a study to assess the risk of dying in alcohol-related motor vehicle crashes among drivers who were arrested for DWI. The evaluation of the State's MSAAP will build on this research by assessing the effectiveness of mandatory substance abuse assessment and treatment in reducing the risk of rearrest for DWI.

5. NCDEHNR works closely with the State's Highway Safety Research Center (HSRC). The HSRC retains copies of the State's driver history files—which will be used for this evaluation—and provides the programming and technical assistance needed to work with the State's driver history files.

Executive Order 12372 Review

This program is subject to Intergovernmental Review of Federal Programs as governed by Executive Order (E.O.) 12372. E.O. 12372 sets up a system for State and local government review of proposed Federal assistance applications. The applicant should contact their State Single Point of Contact (SPOC) as early as possible to alert them to the prospective application and receive any necessary instructions on the State process. If the SPOC has any State process recommendations on the application, they should be sent to Henry S. Cassell, III, Grants Management Officer, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 East Paces Ferry Road, NE., Room 300, Mailstop E-13, Atlanta, GA 30305, no later than 60 days after the application deadline date. The Announcement Number and Program Title should be referenced on the document. The granting agency does not guarantee to "accommodate or explain" for State

process recommendations it receives after that date.

Public Health System Reporting Requirements

This program is not subject to the Public Health System Reporting Requirements.

Catalog of Federal Domestic Assistance Number

The Catalog of Federal Domestic Assistance Number is 93.136.

Where To Obtain Additional Information

If you are interested in obtaining additional information regarding this project, please refer to Announcement 551 and contact Adrienne Brown, Grants Management Specialist, Grants Management Branch, Procurement and Grants Office, Centers for Disease Control and Prevention (CDC), 255 E. Paces Ferry Road, NE., Mailstop E-13, Atlanta, GA 30305, telephone (404) 842-6634.

A copy of "Healthy People 2000" (Full Report; Stock No. 017-001-00474-0) or "Healthy People 2000" (Summary Report; Stock No. 017-001-00473-1) referenced in the SUMMARY may be obtained through the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9325, telephone (202) 512-1800.

Dated: June 1, 1995.

Joseph R. Carter,

Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention (CDC).

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[CDC 573]

Project Grant to Assess Tuberculosis Control Efforts on College and University Campuses in the United States

Summary

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1995 project grant funds for a sole source grant to the American College Health Association (ACHA). Approximately \$60,000 is available in FY 1995 to support this project. It is expected the award will begin on or about September 30, 1995, for a 12-month budget and project period. The funding estimate may vary and is subject to change.

The purpose of this grant is to assess: (1) implementation of student prematriculation and staff screening for tuberculosis (TB) infection; (2) attitudes

toward and barriers to implementing screening; (3) practices concerning preventive therapy and therapy for TB cases; and (4) the impact of TB control policies on college and university campuses.

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 to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority areas of HIV Infection and Immunization and Infectious Diseases. (To order a copy of "Healthy People 2000," see the section **WHERE TO OBTAIN ADDITIONAL INFORMATION.**)

Authority

This grant is authorized under Sections 301(a) and 317(a) of the Public Health Service Act (42 U.S.C. 241 and 247b) as amended. Applicable program regulations are found in part 51 (b), subparts A, of Title 42, Code of Federal Regulations.

Smoke-Free Workplace

The PHS strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products, and Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, and early childhood development services are provided to children.

Eligible Applicant

Assistance will only be provided to ACHA for this project. No other applications are solicited. The program announcement and application kit have been sent to ACHA.

ACHA is the most appropriate and qualified agency to provide the services specified under this program announcement because: ACHA is a voluntary, nonprofit organization representing over 850 colleges and universities in the United States, Canada, and internationally, as well as more than 2600 individual health professionals. ACHA's operations are national in scope and are implemented via six regions: New York/New England; Mid-Atlantic; South/Southwest; Mid-America; Rocky Mountain and Pacific Coast. ACHA promotes cooperative efforts among schools of higher education, shares knowledge on important college health issues and is a central resource for development of educational materials and programs concerning health policies for colleges and universities. Only ACHA has the