

19 jurisdictions need take no action regarding E.O. 12372. Applications for projects to be administered by Federally-recognized Indian Tribes are also exempt from the requirements of E.O. 12372.

It is imperative that the applicant submit all required materials to the SPOC and indicate the date of this submittal (or the date of contact, if no submittal is required) on the Standard Form (SF) 424, item 16a. Under 45 CFR 100.8(a)(2), SPOCs have 60 days from the grant application deadline to comment on applications for financial assistance under this program. These comments are reviewed as part of the award process. Failure to notify the SPOC can result in a delay in the award of funds.

The SPOCs are encouraged to eliminate the submission of routine endorsements as official recommendations. Additionally, SPOCs are requested to clearly differentiate between mere advisory comments and those official State process recommendations which may trigger the accommodate or explain rule. It is helpful to ACYF in tracking SPOC comments if the SPOC will clearly indicate the applicant organization as it appears on the application SF 424. When comments are submitted directly to ACYF, they should be addressed to the application mailing address located in the front section of this announcement.

B. Paperwork Reduction Act of 1980

Under the Paperwork Reduction Act of 1980, Public Law 96-511, the Department is required to submit to OMB for review and approval any reporting and record keeping requirements in regulations, including program announcements. This program announcement does not contain information collection requirements beyond those approved for ACF grant applications under OMB Control Number 0348-0043.

C. Deadline for Submission of Applications

The closing date for submission of applications under this program announcement is August 8, 1995.

Applications sent by fax will not be accepted. Applications which are sent by mail must be received on or before the deadline date at the following address: Department of Health and Human Services, ACF/Division of Discretionary Grants, 6th floor, 370 L'Enfant Promenade, S.W., Washington, D.C. 20447, Attn: Child Care Research Partnerships.

Hand delivered applications are accepted during the normal working hours of 8:00 a.m. to 4:30 p.m., Monday through Friday, on or prior to the established closing date at: Administration for Children and Families, Division of Discretionary Grants, 6th Floor, ACF Guard Station, 901 D Street, SW., Washington, DC 20047, Attn: Child Care Research Partnerships.

An application will be considered as meeting the deadline if it is received on or before the deadline date at the address or receipt point specified in this program announcement.

Applications which do not meet the above criteria are considered late applications and will not be considered or reviewed in the current competition. The ACYF will send a letter to this effect to each late applicant.

The ACYF reserves the right to extend the deadline for all applicants due to acts of God, such as floods, hurricanes or earthquakes; if there is widespread disruption of the mail; or if ACYF determines a deadline extension to be in the best interest of the Government. However, ACYF will not waive or extend the deadline for any applicant unless the deadline is waived or extended for all applicants.

D. Instructions for Preparing the Application and Completing Forms

The SF 424, 424A, 424B, and certifications have been reprinted for your convenience in preparing the application. You should reproduce single-sided copies of these forms from the reprinted forms in the announcement, typing your information onto the copies. Please do not use forms directly from the **Federal Register** announcement, as they are printed on both sides of the page. Make single-sided copies and use them.

Please prepare your application in accordance with the following instructions:

1. SF 424 Page 1, Application Cover Sheet

Please read the following instructions before completing the application cover sheet. An explanation of each item is included. Complete only the items specified.

Top of Page Leave blank.

Item 1—Type of Submission—Preprinted on the form.

Item 2—Date Submitted and Applicant Identifier—Date application is submitted to ACF and applicant's own internal control number, if applicable.

Item 3—Date Received By State—State use only (if applicable).

Item 4—Date Received by Federal Agency—leave blank.

Item 5—Applicant Information.

Legal Name—Enter the legal name of the applicant organization. For applications developed jointly, enter the name of the lead organization only. There must be a single applicant for each application. **Organizational Unit**—Enter the name of the primary unit within the applicant organization which will actually carry out the project activity. Do not use the name of an individual as the applicant. If this is the same as the applicant organization, leave the organizational unit blank. **Address**—Enter the complete address that the organization actually uses to receive mail, since this is the address to which all correspondence will be sent. Do not include both street address and P.O. box number unless both must be used in mailing. Name and telephone number of the person to be contacted on matters involving this application (give area code)—Enter the full name (including academic degree, if applicable) and telephone number of a person who can respond to questions about the application. This person should be accessible at the address given here and will receive all correspondence regarding the application.

Item 6—Employer Identification Number (EIN)—Enter the employer identification number of the applicant organization, as assigned by the Internal Revenue Service, including, if known, the Central Registry System suffix.

Item 7—Type of Applicant—Self-explanatory.

Item 8—Type of Application—Preprinted on the form.

Item 9—Name of Federal Agency—Preprinted on the form.

Item 10—Catalog of Federal Domestic Assistance Number and Title—Enter the Catalog of Federal Domestic Assistance (CFDA) number which is assigned to the program under which assistance is requested and its title. The CFDA for the Child Care Research Partnerships is 93.647.

Item 11—Descriptive Title of Applicant's Project—Enter the project title. The title is generally short and is descriptive of the project.

Item 12—Areas Affected by Project—Enter the governmental unit where significant and meaningful impact could be observed. List only the largest unit or units affected, such as State, county, or city. If an entire unit is affected, list it rather than subunits.

Item 13—Proposed Project—Enter the desired start date for the project and projected completion date.