PAPERWORK REDUCTION ACT SUBMISSION

Form OMB 83-I

1. Agency/Sub-agency originating request Peace Corps/Office of Medical Services

2. OMB Control Number a. 0420-0510

3. Type of information collection c. Extension of a currently approved collection

4. Type of review requested a. Regular

5. Small entities No

6. Requested expiration date a. Three years from the approval date

7. Title Health Status Review/Report of Medical Exam/Report of

Dental Exam

8. Agency form numbers PC-1789/PC-1790 S/PC-1790 Dental

9. Keywords Medical Examinations, Physical

Examinations, Dental Examinations, Volunteer Services

10. Abstract

All applicants for service in the Peace Corps must undergo a physical and dental examination prior to service. The results of these examinations are used to ensure that the applicants will be able to serve in the Peace Corps without undue disruption due to health problems. All Peace Corps applicants must complete a Health Status Review prior to nomination for Peace Corps service. Once nominated, the PC-1790 S and PC-1790 Dental forms must be completed to determine medical qualification for service.

- 11. Affected public
 - a. P Individuals or households
 - b. X Business or other for-profit
- 12. Obligation to respond
 - b. X Required to obtain or retain benefits
 - c. P Mandatory
- 13 Annual reporting and record-keeping hour burden

a. Number of respondents
b. Total annual responses
9,700 / 6,000 / 6,000
9,700 / 6,000 / 6,000

1. Percentage of responses collected electronically 61% / 0% / 0%

c. Total annual hours requested
d. Current OMB inventory
e. Difference
7,275 / 3,000 / 3,000
1,625 / 3,000 / 0
5,650 / 0 / 3,000

f. Explanation of difference

Program change see attachment #15
Adjustment see attachment #15

14. Annual reporting and record-keeping cost burden

a. Total annualized capital/startup costs \$0.0K / \$0.0K / \$0.0K

b. Total annual costs (O&M) \$0.0K / \$312.0K EST / \$252.0K EST

c. Total annualized cost requested \$0.0K / \$312.0K EST / \$252.0K EST

d. Current OMB inventory \$96.7K / \$839.0K / \$0.0K

e. Difference (\$96.7K) / (\$527.0K EST) / \$252.0K EST

f. Explanation of difference

a. Program change see attachment #15

b. Adjustment see attachment #15

- 15. Purpose of information collection
 - a. X Application for benefits
 - g. P Regulatory or compliance
 - 16. Frequency of record-keeping or reporting
 - c.X Reporting
 - 8. X Other one time
- 17. Statistical methods
- 18. Agency Contact Emily Deady (202) 692-1509

No