INCOME ELIGIBILITY GUIDELINES [Effective from July 1, 2019 to June 30, 2020]

		Federal po	verty guidelii	nes—100%			Reduced	price meals	—185%	
Household size	Annual	Monthly	Twice- monthly	Bi-weekly	Weekly	Annual	Monthly	Twice- monthly	Bi-weekly	Weekly
		48 Contigu	ous States,	D.C., Guam	and Territo	ries				
1	\$12,490	\$1,041	\$521	\$481	\$241	\$23,107	\$1,926	\$963	\$889	\$445
2	16,910	1,410	705	651	326	31,284	2,607	1,304	1,204	602
3	21,330	1,778	889	821	411	39,461	3,289	1,645	1,518	759
4	25,750	2,146	1,073	991	496	47,638	3,970	1,985	1,833	917
5	30,170	2,515	1,258	1,161	581	55,815	4,652	2,326	2,147	1,074
6	34,590	2,883	1,442	1,331	666	63,992	5,333	2,667	2,462	1,231
7	39,010	3,251	1,626	1,501	751	72,169	6,015	3,008	2,776	1,388
8	43,430	3,620	1,810	1,671	836	80,346	6,696	3,348	3,091	1,546
Each add'l family member add	+\$4,420	+ \$369	+ \$185	+ \$170	+ \$85	+ \$8,177	+ \$682	+ \$341	+ \$315	+ \$158
			-	Alaska						
1	\$15,600	\$1,300	\$650	\$600	\$300	\$28,860	\$2,405	\$1,203	\$1,110	\$555
2	21,130	1,761	881	813	407	39,091	3,258	1,629	1,504	752
3	26,660	2,222	1,111	1,026	513	49,321	4,111	2,056	1,897	949
4	32,190	2,683	1,342	1,239	620	59,552	4,963	2,482	2,291	1,146
5	37,720	3,144	1,572	1,451	726	69,782	5,816	2,908	2,684	1,342
-	43,250	3,605	1,803	1,664	832	80,013	6,668	3,334	3,078	1,539
7	48,780	4,065	2,033	1,877	939	90,243	7,521	3,761	3,471	1,736
8	54,310	4,526	2,263	2,089	1,045	100,474	8,373	4,187	3,865	1,933
Each add'l family member add	+\$5,530	+ \$461	+ \$231	+ \$213	+ \$107	+ \$10,231	+ \$853	+ \$427	+ \$394	+ \$197
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			ŀ	lawaii						
1	\$14,380	\$1,199	\$600	\$554	\$277	\$26,603	\$2,217	\$1,109	\$1,024	\$512
2	19,460	1,622	811	749	375	36,001	3,001	1,501	1,385	693
3	24,540	2,045	1,023	944	472	45,399	3,784	1,892	1,747	874
4	29,620	2,469	1,235	1,140	570	54,797	4,567	2,284	2,108	1,054
5	34,700	2,892	1,446	1,335	668	64,195	5,350	2,675	2,470	1,235
6	39,780	3,315	1,658	1,530	765	73,593	6,133	3,067	2,831	1,416
7	44,860	3,739	1,870	1,726	863	82,991	6,916	3,458	3,192	1,596
8	49,940	4,162	2,081	1,921	961	92,389	7,700	3,850	3,554	1,777
Each add'I family member add	+\$5,080	+ \$424	+ \$212	+ \$196	+ \$98	+ \$9,398	+ \$784	+ \$392	+ \$362	+ \$181
				1 7.30		1 72,230				

INCOME ELIGIBILITIY GUIDELINES SUPPLEMENTAL CHART FOR FAMILY SIZES GREATER THAN EIGHT [Effective from July 1, 2019 to June 30, 2020]

Household size	Federal poverty guidelines—100%				Reduced price meals—185%						
	Annual	Monthly	Twice- monthly	Bi-weekly	Weekly	Annual	Monthly	Twice- monthly	Bi-weekly	Weekly	
		48 Contigu	ous States,	D.C., Guam	and Territo	ries					
9	\$47,850	\$3,988	\$1,994	\$1,841	\$921	\$88,523	\$7,377	\$3,689	\$3,405	\$1,703	
10	52,270	4,356	2,178	2,011	1,006	96,700	8,059	4,030	3,720	1,860	
11	56,690	4,725	2,363	2,181	1,091	104,877	8,740	4,370	4,034	2,017	
12	61,110	5,093	2,547	2,351	1,176	113,054	9,422	4,711	4,349	2,175	
13	65,530	5,461	2,731	2,521	1,261	121,231	10,103	5,052	4,663	2,332	
14	69,950	5,830	2,915	2,691	1,346	129,408	10,784	5,392	4,978	2,489	
15	74,370	6,198	3,099	2,861	1,431	137,585	11,466	5,733	5,292	2,646	
16	78,790	6,566	3,283	3,031	1,516	145,762	12,147	6,074	5,607	2,804	
Each add'l family member add	+ \$4,420	+ \$369	+ \$185	+ \$170	+ \$85	+ \$8,177	+ \$682	+ \$341	+ \$315	+ \$158	
			A	laska							
9	\$59.840	\$4,987	\$2,494	\$2,302	\$1,151	\$110.704	\$9.226	\$4,613	\$4,258	\$2,129	
10	65,370	5,448	2,724	2,515	1,258	120,935	10,078	5,039	4,652	2,326	
11	70,900	5,909	2,955	2,727	1,364	131,165	10.931	5,466	5,045	2,523	
12	76,430	6,370	3,185	2,940	1,470	141,396	11,783	5,892	5,439	2,720	
13	81,960	6,830	3,415	3,153	1,577	151,626	12,636	6,318	5,832	2,916	
14	87,490	7,291	3,646	3,365	1.683	161.857	13,489	6.745	6.226	3,113	
15	93,020	7,752	3,876	3,578	1,789	172,087	14,341	7,171	6,619	3,310	
16	98,550	8,213	4,107	3,791	1,896	182,318	15,194	7,597	7,013	3,507	
Each add'l family member add	+ \$5,530	+ \$461	+ \$231	+ \$213	+ \$107	+	+ \$853	+ \$427	+ \$394	+ \$197	
•		·			·	\$10,231					
			H	lawaii							
9	\$55,020	\$4,585	\$2,293	\$2,117	\$1,059	\$101,787	\$8,483	\$4,242	\$3,915	\$1,958	
10	60,100	5,009	2,505	2,312	1,156	111,185	9,266	4,633	4,277	2,139	
11	65,180	5,432	2,716	2,507	1,254	120,583	10,049	5,025	4,638	2,319	

INCOME ELIGIBILITIY GUIDELINES—Continued SUPPLEMENTAL CHART FOR FAMILY SIZES GREATER THAN EIGHT

[Effective from July 1, 2019 to June 30, 2020]

Household size	Federal poverty guidelines—100%				Reduced price meals—185%					
	Annual	Monthly	Twice- monthly	Bi-weekly	Weekly	Annual	Monthly	Twice- monthly	Bi-weekly	Weekly
12	70,260 75,340 80,420 85,500 90,580	5,855 6,279 6,702 7,125 7,549	2,928 3,140 3,351 3,563 3,775	2,703 2,898 3,094 3,289 3,484	1,352 1,449 1,547 1,645 1,742	129,981 139,379 148,777 158,175 167,573	10,832 11,615 12,399 13,182 13,965	5,416 5,808 6,200 6,591 6,983	5,000 5,361 5,723 6,084 6,446	2,500 2,681 2,862 3,042 3,223
Each add'l family member add	+ \$5,080	+ \$424	+ \$212	+ \$196	+ \$98	+ \$9,398	+ \$784	+ \$392	+ \$362	+ \$181

[FR Doc. 2019–08389 Filed 4–25–19; 8:45 am] BILLING CODE 3410–30–P

DEPARTMENT OF AGRICULTURE

Forest Service

Information Collection; Fire & Aviation Management Medical Qualifications Program

AGENCY: Forest Service, USDA. **ACTION:** Notice; request for comment.

SUMMARY: In accordance with the Paperwork Reduction Act of 1995, the Forest Service is seeking comments from all interested individuals and organizations on the extension with revisions to the information collection, Fire & Aviation Management Medical Qualifications Program.

With this extension, the Agency has changed the name of the information collection to Fire & Aviation Management Medical Qualifications Program.

DATES: Comments must be received in writing on or before June 25, 2019 to be assured of consideration. Comments received after that date will be considered to the extent practicable.

ADDRESSES: Comments concerning this notice should be addressed to Attention: Dr. Jennifer Symonds, USDA Forest Service, National Interagency Fire Center, 3833 South Development Avenue, Boise, Idaho 83705. Comments also may be submitted via facsimile to 208–387–5735 or by email to jennifer.symonds@usda.gov.

The public may inspect comments received at the National Interagency Fire Center, during normal business hours. Visitors are encouraged to call ahead to facilitate entry to the building.

FOR FURTHER INFORMATION CONTACT: Dr. Jennifer Symonds, Forest Service Wildland Fire Medical Qualifications Program Manager, at 208–387–5978.

Individuals who use telecommunication devices for the deaf (TDD) may call the Federal Relay Service (FRS) at 1–800–877–8339 twenty-four hours a day, every day of the year, including holidays.

SUPPLEMENTARY INFORMATION:

Title: Fire & Aviation Management Medical Qualifications Program. OMB Number: 0596–0164. Expiration Date of Approval: June 30, 2019.

Type of Request: Extension.
Abstract: The Protection Act of 1922
(16 U.S.C. 594) authorizes the Forest
Service to fight fires on National Forest
System lands. This information
collection is an approved Forest Service
collection. The collection covers the
USDA Forest Service and the
Department of the Interior, and contains
the information collection activities and
burden hours for both agencies.

Wildland firefighters perform long hours of arduous labor in adverse environmental conditions. It is imperative that these firefighters be in sufficient physical condition to avoid injury to themselves or their coworkers. Federal employees and private individuals seeking employment as a firefighter with the Forest Service or the Department of Interior complete the health capability forms. This information collection covers the forms and burden hours associated with the private individuals who apply for firefighter positions with the aforementioned agencies.

Form FS-5100-30, Work Capacity Test—Informed Consent. The form is signed by those deemed to be in sufficient health to undergo a Work Capacity Test. The Work Capacity Test determines the level of an individual's aerobic fitness, level of muscular strength, and muscle endurance. The consent form is necessary to ensure the individual taking the test is aware of the various testing levels (arduous, moderate, and light) and the risks involved. The individual indicates the following:

• They have read the information on the form, the brochure "Work Capacity Test" and understand the purpose, instructions, and risks of the test;

- They have read the information, understood, and truthfully answered the Health Screen Questionnaire; and
- Test to be taken—pack test (arduous), field test (moderate), or walk test (light).

Failure to collect this data could result in injuries or deaths during the "Work Capacity Test" and while working on wildland fires. The information provided by an applicant for Federal employment is stored in secured official files, maintained according to Agency regulations. The information gathered is not available from other sources.

Estimate of Annual Burden: 5.5 Minutes.

Type of Respondents: Individuals. Estimated Annual Number of Respondents: 20,504.

Estimated Annual Number of Responses per Respondents: 1. Estimated Total Annual Burden on Respondents: 1,845 hours.

Form FS-5100-31, *Health Screening Questionnaire*. Prospective fire personnel must complete this form when seeking employment as new fire personnel with the Forest Service or Department of the Interior. This form collects the following information:

- Name and Unit;
- Medical history;
- Current medical symptoms;
- Other health issues; and
- · Cardiovascular risk factors.

The information collected pertains to an individual's health status and health history in an effort to determine if any physical conditions exist that might result in injury or death during fitness testing or when fighting a wildfire. If Federal Agency officials determine, based on the collected information, that an individual may not be physically able to train for or take a Work Capacity Test; the agency will require the individual to undergo a physical examination by a physician.

Failure to collect this data could result in injuries or deaths during the "Work Capacity Test" and while working on wildland fires. The