



**World Community Advisory Board (CAB)  
on Hepatitis C Generics and Diagnostics  
18-20 July 2017  
Bangkok, Thailand**

**Application Form:** Global Hepatitis C Generic Treatment and Diagnostics Access Advocacy Workshop and Industry Meeting

\*\*Funding for this meeting has been secured and organizers will sponsor participants. Proposal reviewers will keep all information confidential.

**Deadline for applications is Friday, 28 April 2017, 6pm EST.**

Please email your completed form to: [bryn.gay@treatmentactiongroup.org](mailto:bryn.gay@treatmentactiongroup.org)  
An independent committee will review eligible applications.

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**Personal details**

Name:  
Title:  
Organization:  
Mailing Address:  
Country:  
E-mail address:  
Phone number:  
Web site (optional):  
Gender:

Please answer the following questions. Text boxes expand as you type – or please delete extra space if you do not need this. **Only English-language applications will be accepted.**

**About you:**

**Why do you want to attend the World CAB on Hepatitis C Generics and Diagnostics?  
Please also include specific skills, qualities and knowledge you wish to develop.**

**What are the strengths that you will bring to the workshop? Please include HCV treatment and diagnostics knowledge.**

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**Please briefly describe the situation regarding the HCV pandemic, and regarding access to HCV diagnostics and treatment, in the country/region where you work**

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**Please describe two most important activities that you are involved in as a treatment activist/advocate**

1.
2.

<b>Do you use the hep-C-working group list-serv forum?</b>	Select as many as appropriate
I am not subscribed	
I often read posts	
I often respond to posts	
I often start new posts and topics	
Please comment on your current forum use, whether this is the right level for you, whether you would like to change this.	

**How many HCV treatment access meetings have you attended in the last 2 years?**

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Please comment on the meetings and how you have used the information:

**Are you involved in any other HCV activities?**

Please add details:

**Please describe any previous experience you have had, discussing or negotiating pricing, patent, registration, or other issues with multinational originator and diagnostics companies and/or local generic producers?**

Please add details:

**What would encourage you to participate more in the global HCV treatment access movement?**

Please share whatever ideas you may have regarding the content, format, accessibility, or any other component of the forum and/or meetings.

**Is there anything else you want to tell us about yourself and why you want to come on this meeting?**

**Supporting information**

Please outline any other qualities, qualifications, skills and/or experiences you could bring to the World CAB meeting. How do you interact with other HCV positive people or organizations?

**Future commitments**

Approximately how much time do you currently spend on:  
(i) HCV related community projects and (ii) on your own learning and development.  
Please comment on whether this is likely to change in the future.

**Please circle one:**

1. Are you living with HCV or HIV/HCV?

Yes      No      Prefer not to disclose      Don't know

2. Do you identify as a person who uses drugs?

Yes      No      Prefer not to disclose

3. Will you need methadone?

Yes      No      Prefer not to disclose

4. Have you ever been incarcerated for any period of time?

Yes      No      Prefer not to disclose

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**Declaration**

I confirm that the information given is true.

Signed

Date

**Please provide the names and email contacts of two (2) references with current, first-hand knowledge of your work on HCV:**

1.

2.