



STATEMENT OF INTEREST

ORGANIZATION DETAILS

Name of Organization

.....

Mailing Address

.....

City, State, Zip Code

.....

Phone/Fax

.....

Chief Executive

(name/title)

.....

Date established

501(c)(3)?

Y/N

.....

Number of staff

.....

CONTACT PERSON

Name

.....

Position title

.....

Mailing Address (if
different)

.....

City, State, Zip Code

.....

Phone/Fax

.....

Email Address

.....

Organization's mission

Please describe the specific issue areas your organization tackles

- HIV/AIDS
- Reproductive health
- Child Survival
- TB

- Environmental health
- Infectious diseases
- Malaria
- Nutrition

- Other
Please specify:

Please describe your outreach to students from diverse backgrounds

- Graduate students
- Undergraduate students
- Community colleges
- High schools
- Other - *please specify*:

- African American
- American Indian/Alaskan
Native
- Asian or Pacific Islander
- Caucasian

- International students
- LGBTI
- Students of particular faiths
Please specify:

- Latino/a
- Other - *please specify:*

In no more than five points, please describe the key achievements of your organization over the past five years

Please describe the experience your organization would bring to UCGH in the areas listed below that relate to the work of your organization *Please limit each response to approximately 100 words*

Advocacy, Lobbying and political connections

The UCGH Speakers Bureau (speakers accessible for conferences and forums)

Faculty Contacts in Universities

Domestic internships/ professional development opportunities

International internships/ professional development opportunities

Media/Public Relations

Please list two other organizations with which you have collaborated or worked closely with in the past, and the initiative on which you collaborated:

1.	2.
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Finally, how do you envision collaboration with the other UCGH members catalyzing the work of your organization? *Please limit your response to no more than 300 words*

Do you have an interest in participating in either/both of the working groups?

- Advocacy & Outreach Working Group**
- Professional Development Working Group**

Idea for other working group _____

Signed **Date**

Title **President** **CEO**
(please
select) **Director** **Chair of Board**
