

Annex 5 - Request for a meeting/event to be co-sponsored by the regional office for Europe of the WHO

- Organization requesting co-sponsorship

Name:

Address:

Phone:

Fax:

E-mail:

Web-site:

- Is your organization a non governmental organization in official relations with WHO?

Yes No

- If not, please state the character of your organization:

international national governmental

regional educational institution commercial enterprise

other - please specify:

- Event/meeting details

Title of the meeting/event:

Date of the meeting/event:

Venue:

Web site (if any):

- Attachments enclosed:

invitation letter draft programme or agenda draft list of participants

other - please specify:

- Has your organization previously applied for co-sponsorship for similar purposes in connection with the same subject matter?

Yes No

If yes, for which meeting/event?

Was co-sponsorship then:

Approved Refused

If approved, please provide a copy of that approval and relevant background documents

- Please specify whether any commercial companies are involved in the meeting/event by way of:

(a) financial support / in-kind support:

Yes No

If yes, please specify type:

(b) organization of the meeting/event:

Yes No

If yes, please specify in what way:

(c) participation in a scientific committee, workshop etc.:

Yes No

If yes, please specify in what way:

(d) other involvement (for example, exhibition, reception etc.):

Yes No

If yes, please specify:

If yes has been answered to any of the questions under section 5, please specify:

➤ name(s) and nature of business of the commercial company(ies) concerned:

➤ will the commercial company(ies) have or be reasonably perceived as having a direct commercial interest in the outcome of the meeting/event?

Yes No

- Please confirm that the influence of WHO will be assured in preparation of the agenda, in selection of speakers and participants, and that your organization accepts WHO's views and policies and active participation in the meeting/event:

- Please list major subjects to be discussed at the meeting/event:

- Would WHO's sponsorship of the meeting/event further the scientific, technical and/or managerial interests of WHO?

Yes No

If yes, in what way?

- Does the meeting/event have political or commercial implications?

Yes No

If **yes**, in what way?

- How would support from WHO facilitate national participation?

- Please state what form the report or proceedings of the meeting/event will take and to whom this will be distributed and confirm that the report/proceedings will be sent to WHO for review and clearance prior to distribution in any form whatsoever:

- Is WHO expected to make a financial (or other) contribution?

Yes No

If **yes**, specify and justify why to do so is in WHO's interest:

- Do you wish to request to use the WHO emblem in connection with the event?

Yes, permission to use the WHO emblem is requested No, use of the WHO emblem is not requested

If **yes**, please complete sections 14 and 15 below and then sign and date this application in the space provided at the end of this document.

If **no**, please sign and date this application in the space provided at the end of this document.

- For which purpose do you wish to use the WHO emblem?

information circular(s) meeting documents
 headed notepaper report/proceedings/other publication
 web site (URL):
 other - please specify:

- Has your organization previously applied for use of the WHO emblem for similar purposes in connection with the same subject matter?

Yes No

If **yes**, was use of the emblem then:

Approved Refused

If you are requesting to use the WHO emblem, please **attach** a proposed final layout showing the approximate location and size of the emblem and, if applicable, the proposed location or size of any other emblem to be used.

Authorized signatory on behalf of the organization requesting co-sponsorship:

Signature:

Date

.....

Name and title:

President of the Inebria Network

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