

Asia Regional Consultation on Strengthening Interfaith Actions in HIV Response Application Form

I. Personal Information	
Full Name (as on passport)	
Nationality (as on passport)	
Date of Birth (dd-mm-yyyy)	
Gender	
Category	□Clergy □Woman □Youth □Lay □Not Applicable
Religious Affiliation / Church / Organization	
Occupation	
Contact Details	Mobile:
	Email Address:
II. Academic/Educational Background	
Educational qualifications and year of course(s) completion	
Other Trainings with regards to HIV and AIDS and related issues	
III. Motivation in Applying for the Consultation	
1. Indicate your involvement and or experiences in relation to Interfaith efforts and HIV and AIDS Issue	
2. Please state your reason for applying for the program and how can you contribute back to faith community / Church/	
Organization	

V. Other Information (if any)

Date:

Signature:

*PLEASE RETURN this form on or before September 10, 2021 by e-mail with a subject of "CCA-ATCHAA Interfaith Consultation Application – Name of Applicant" to <u>atchaa@cca.org.hk</u>. We will be sending you a confirmation e-mail once your application is approved. Please note that this is an online training thus your full participation is required.

*Selection will be based on competence, confessional and gender balances, sub-regional and institutional representation, ability to contribute and participate in enriching the content of the workshop and discussions.