One National Authority - The Country Coordinating Mechanism against HIV Infection/AIDS, Tuberculosis and Malaria Diseases in Georgia (Georgia CCM)

Application Form

Na	ame of the Candidate	Please attach CV	
Nai	ne of the Organization		
Organi	zations identification code		
	Constituency	Please select one	
1	NGO (either international or national) active in the area of TB \square		
2	HIV KAP		
2.2	OTHER (please specify as per specification of the announcement)		
2.3	MSM □		
3	Experience of working in the field	□ <3 years □ 3-5 years □ more than 5 years	
4	Please attach the charter of your entity and the list of the projects implemented during the last three years		
5	the Constituency. If the candidate a	the detail description to illustrate how the candidate it linked to tuency. If the candidate acts on behalf of the organization please attach a charter of the organization	
6	The Organization is currently implementing the Global Fund supported projects	☐ Yes ☐ No	
7	The organization plans to continue working (and has adequate resourses) in the field of HIV and TB resepctivelly for the period of consecutive two years.	☐ Yes ☐ No Please clarify an answer	

8	_	the Conflict of Interest is	□ Yes
	anticipated with a	dmittance of the	\square No
	organization to Co	CM membership	Please clarify an answer
9	The description of	Please attach to the application the supporting documentation of the selection process:	
	the selection process		
		1) Description of the communities are upurpose of this into main characteristic. 2) The selection production within the Constit. 3) The minutes of the selection of the ca. 4) Key documents described the purpose of selection or invitation to the secommunication or invitation to the secommunication for en CCM and Constitution communication recandidacies need to Constituency; 6) The mechanism or unsatisfactory	e meeting convened with the purpose of