



Due Diligence Form A

For completion by prospective private sector/organised business partners

My organisation wishes to be

at the conference

Basic Information

.. Name of company/organisation

2. Name and title of individual completing form

3. Date of form completion

4. Address:

5. Telephone number

6. Website and social media channels:

7. Headquarters contact information (if different from above):

About the Organisation

1. Number of employees (regionally or worldwide)

2. Sector of activity (e.g. communications, financial, insurance, food and beverage, information technology, petrochemicals, pharmaceutical, sports, etc.)

3. Mission Statement

4. Type of company/organisation (e.g. industry association, private company, corporate foundation etc.)

5. Main products/services/activities (list only the most important or attach/link to a full list or, if available)

6. Does the company/organisation manufacture or sell any products related to the alcohol, tobacco or arms industries? If so please indicate.

7. Is the company/organisation involved in any of the aforementioned areas (alcohol, tobacco or arms industries)?

Yes

No

8. If yes to No. 7 please indicate which areas and the share/percentage of the company's/organisation's total annual revenue which its involvements in these areas generate.

9. For business organisations (e.g. a chamber of commerce) receiving funding/ donations/membership fees, what are the main sources? In particular, please note what proportion (if any) funds come from: (a) Organisations whose business is sale or promotion of products or services that may be detrimental to public health or that may cause severe environmental contamination and/or (b) the alcohol, tobacco or arms industries. Explain how organisations of type (a) or (b) above are involved in or influence the work of the organisation.

10. Board and key Executives (please attach list of members and their positions) Use additional pages if necessary

11. Executives or Board Members are connected through their profession to alcohol, tobacco or arms industries? If Yes, please explain the connection. Include additional pages if necessary

12. Disclosure of personal interests: To the best of your knowledge, please name and state the connection of any CARPHA employees or Board Members with whom your company/organisation has a close connection (e.g. because they, or a close family member, are on your Board, provide consulting or advice or are shareholders of your organisation/company)

13. Does the company/organisation have a good reputation in areas of corporate social responsibility ("CSR")? If so, please share examples of your CSR programme with either links and/or supporting documents.

14. In the case of new companies or companies with past CSR troubles are you committed to instituting/improving a sound CSR policy? If so, please briefly describe how such commitment is evidenced with links and/or supporting documents.

15. a) Does the company/organisation have a history of corporate philanthropy or corporate giving?

Yes No

b) Include name of corporate foundation if relevant

16. Does the company/organisation give to health-related issues or causes? Yes No

If yes, mention the most relevant

17. Has the company had any institutional policy, situation, advertisements, project, etc, that have been characterised as negatively affecting public health? If so, please explain. Use additional pages if necessary.

18. Are there any pending lawsuits or prominent lawsuits (inclusive of but not limited to health related actions) against the company/organisation? If so, briefly describe these pending and/or active lawsuits. Please provide links and/or supporting documents.

19. Have you previously exhibited/sponsored an activity at the Health Research Conference? Yes No
If yes, indicate last year of participation

20. Previous/Current relationship with CARPHA, CARICOM, or PAHO/WHO. (If yes, please provide additional information as an attachment)

I certify that I have the authority to submit this application. I also certify that all answers are true and accurate to the best of my knowledge and belief.

Name

Designation

Signature (required)

Date signed