



**DUE DILIGENCE FORM FOR POTENTIAL PARTNERS IN
PRIVATE SECTOR OR CIVIL SOCIETY**

Name of Company/Organization

Name/Title of Individual Completing Application Form:

Date:

Address:

Telephone number:

Email:

Website:

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

2. Number of employees (regionally or worldwide):

3. Sector of activity (e.g. academia, civil society, communications, financial, insurance, food & beverage, information technology, petrochemicals, pharmaceutical, sport, etc):

4. Mission Statement

5. Type of Company/Organization (e.g. NGO, Academic, Industry Association, private company, etc)

6. Main products/services /activities (list only most important or attach/link to a full list of if available):

7. Does the company/organization manufacture or sell any products related to the alcohol, tobacco or arms industries?

Yes No

8. Does the company/entity receive funding from alcohol, tobacco or arms industries?

Yes No

9. Executives or Board Members are connected to alcohol, tobacco or arms industries?

Yes No

If Yes, please explain the connection. Include additional pages if necessary.

10. Latest Annual Report from (include in file)

11. Social Responsibility (Attach last report or link to the CSR web page)

a. Does the company/organization have a history of corporate philanthropy or corporate giving? ___Yes___No

b. Include name of corporate foundation if relevant _____

12. Does the company/organization give to health-related issues or causes?

___Yes___No

If yes, mention the most relevant

13. Has the company had any institutional policy, situation, advertisements, project, etc, that have been characterized as negatively affecting public health? If so, please explain.

14. Previous/Current relationship with CARPHA, CARICOM, or PAHO/WHO

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 and DESIGNATION
