**WHO PQT/VCP Meeting Request Form**

**Instructions – Complete form and email to** [**pqvectorcontrol@who.int**](mailto:pqvectorcontrol@who.int) **with the necessary supporting materials**

**1. Contact Details**

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| **Applicant (name of manufacturer)** |  |
| **Contact person responsible for this request** |  |
| **Contact person's job title/position** |  |
| **Contact details *(Including full postal address, phone, fax, email)*** |  |

**2. Meeting Details**

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| 2.1 Type of meeting requested |

Face-to-face  Teleconference  Videoconference

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| 2.2 Brief statement of the purpose of the meeting and where the meeting fits in your overall dossier development/plans for submission to PQT-VC |

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| 2.3 Specific objectives/outcomes expected from the meeting |

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| 2.4 Preliminary proposed agenda including estimated time needed for each agenda item and designated speaker(s) |

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| 2.5 List of specific questions by technical area |

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| 2.6 List of all individuals (including titles) who will attend the proposed meeting from the applicant’s organization and/or consultants. |

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| 2.7 Proposed date(s) and time(s) for the meeting |

**3. If applicable, provide a description of the product development status- Labs and field sites being contracted – planned development of study protocol, planned initiation of studies, planned completion of studies, etc.**

Completed by:       Date: