INSTRUCTIONS & BACKGROUND
Consistent with the mandate of the Centers for Disease Control and Prevention (CDC), the Los Angeles County HIV Prevention Planning Committee (PPC), in partnership with the Division of HIV and STD Programs (DHSP), identifies and supports methods and programs that are effective in preventing the transmission of HIV. The PPC engages in an ongoing process to develop and update a comprehensive HIV prevention plan for the diverse populations of Los Angeles County.

PPC members must commit a minimum of eight hours per month to PPC-related activities including subcommittees, adhocs, special meetings and annual planning meetings. Members can serve no more than three consecutive two-year terms, and are selected for their expertise and experience in HIV prevention, planning, and other relevant skills, as well as to meet the CDC's mandate that the demographic composition of the PPC reflect the local epidemic. Applicants may not be selected for any number of reasons, including the PPC's demographic needs at the time. The PPC retains applications for one year and reviews all applications whenever new vacancies arise. The PPC encourages interested applicants to reapply when their applications expire. If you are interested in becoming a PPC member, please complete this application and return it, along with your resume, to the address or email below. The PPC encourages all applicants to thoroughly review their applications and resumes before submission, as incomplete applications will not be considered.

Return your PPC application by email to ppc@ph.lacounty.gov
or by mail in an envelope marked “CONFIDENTIAL” to
Division of HIV and STD Programs
Office of Planning - PPC Unit
600 South Commonwealth Avenue, 10th Floor
Los Angeles, California 90005

Questions about this application can be forwarded to PPC@ph.lacounty.gov or to Elizabeth Escobedo at (213) 351.8093.

PART I: CONTACT INFORMATION & SIGNATURE

The Name, Agency/Affiliation, Mailing Address, Work Phone, Fax Number, and Email Address (if any) for each PPC member is public information and displayed on the PPC Roster distributed at every monthly PPC meeting.

All other information requested as part of the application process will be kept CONFIDENTIAL...

Name

Agency/Affiliation

Mailing Address

Work Phone

FAX Number

Email Address

Home Phone
PART II: DEMOGRAPHIC INFORMATION

The PPC uses the following information to ensure parity, inclusion, and representation on the PPC, and to ensure that the demographic composition of the PPC reflects the demographic composition of the local epidemic.

GENDER
- Female
- Male
- Transgender (female to male)
- Transgender (male to female)

DATE OF BIRTH: ____________

SEXUAL ORIENTATION
- Bisexual
- Gay
- Heterosexual
- Lesbian

RACE / ETHNICITY
- African-American/Black (Not Hispanic)
- Asian-American
- Latino/a
- Native American Indian/Alaskan Native
- Pacific Islander
- White (Not Hispanic)
- Other (Specify): _____

ZIP CODE
That You Live In: _______
That You Work In: _______

CULTURAL BACKGROUND
If different from your indicated Race/Ethnicity: _____

LANGUAGE
Other than English, please list languages known and use circles to indicate if you speak (S), read (R), or write (W) the language:
- English Only
- S  R  W _____
- S  R  W _____
- S  R  W _____

PRIORITIZED POPULATION ASSOCIATION - With which Priority Population do you identify as:
- HIV Positive Individuals
- Transgender Individuals
- People Who Share Needles/Works
- None

Which of the following critical target populations and contributing co-factors are you most knowledgeable about/work with? Check all that apply.

CRITICAL TARGET POPULATIONS
- Gay Men
- Non-Gay Identified men who have sex with men/transgenders/multiple genders
- Transgender
- Women at Risk for Transmitting HIV
- Sex Workers
- Young women who have sex with partners of unknown status/risk and/or in a highly impacted geographic area/zip code
- People Who share needles/works
- Heterosexual-Identifying Men at Sexual Risk
- HIV +
- Incarcerated/Recently Paroled Persons
- Latino/as
- Lesbians
- Male Injection Drug User
- African Americans

CONTRIBUTING CO-FACTORS
- Sex Work
- Other Substance Use
- Stigma
- Discrimination
- Racism
- Educational Level
- STDs
- Mental Health Issues
- Violence
- Sexual Assault
- Incarceration
- Homelessness
- Immigration Status
- Language
- Poverty
- Other (Specify): _____
Part III: Skills, Experience & Expertise

Please answer each of the following questions. Feel free to add additional pages if you need more space.

1. Can you commit to a minimum of eight hours per month for two years for PPC-related activities, including subcommittee participation and the annual two-day Planning Meeting?
   - Yes  [ ]  No  [ ]

2. Are you interested in being paired with a seasoned PPC member for mentoring?
   - Yes  [ ]  No  [ ]

3. Why are you interested in becoming a member of the HIV Prevention Planning Committee?

4. In your opinion, what are the most pressing HIV prevention needs of Los Angeles County?

5. In your opinion, what are some key elements to effective HIV prevention?

6. Please describe any HIV prevention activities in which you have participated.

7. Please describe PPC activities in which you have participated.

8. What will you contribute to the PPC?

9. Please indicate the skills and areas of expertise you posses that you feel qualify you to become a PPC member. Check all that apply.

   - Behavioral and Social Research
   - Capacity Building/Technical Assistance
   - Community Organizing
   - Curriculum Development
   - Economic Development
   - Education and Training
   - Epidemiology
   - HIV/AIDS Prevention and Prevention Programming
   - HIV + (HIV Positive)
   - Mental Health Services
   - Needs Assessment/Resource Inventory/Gaps Analysis
   - Perinatal
   - Planning
   - Policy Analysis
   - Program Development
   - Program Evaluation
   - Public Health
   - Rape/Sexual Abuse/Domestic Violence
   - Social Marketing
   - STD and TB Prevention
   - Substance Abuse Prevention and Treatment
   - Teen Pregnancy Prevention
   - Youth Services

   Other (specify):  

10. Please select a subcommittee you would be most interested in participating on as a PPC member.

   - Internal Operations  [ ]  External Operations  [ ]
11. Please provide contact information for TWO people who would be willing to serve as references.

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Part IV: Statement of Commitment

I commit to dedicating a minimum of eight hours a month to PPC related activities.

NAME: (please print) _____________________________________________

SIGNATURE: __________________________________ DATE*: ______________

* Applications are retained and reviewed up to one year from this date.

In addition to reviewing your application and resume, you may be asked to participate in a face to face or phone interview with a member of the Internal Operations committee, the committee that reviews and forwards recommendations of new members to the Steering committee.

Please don’t forget to include your resume with your application. Thank You.