Logo, company name

Description automatically generated

**NICHE Patient and Public Involvement (PPI) Advisory Group:**

**Expression of interest form**

**Please complete this form and send to** [**alex@ght.org.uk**](mailto:alex.sparrowhawk@tht.org.uk)

**About you**

|  |  |
| --- | --- |
| **Name** |  |
| **Email address** |  |

**Previous experience**

Whilst not compulsory, please let us know of any experience of representing people living with HIV in research, in community organisations through co-production initiatives or in other ways.

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**Why are you interested in being involved?**

In a couple of sentences please let us know why you wish to take part and help us shape the research programme.

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