



# Consumer Advocate Job Application

## **About NAPWA-US**

The National Association of People with AIDS – United States (NAPWA – US) is the oldest national AIDS organization in the United States, and the oldest national network of people living with HIV/AIDS in the world

## **NAPWA Mission**

The National Association of People with AIDS advocates on behalf of all people living with HIV and AIDS in order to end the pandemic and human suffering caused by HIV/AIDS

## **Access Matters**

Access to HIV and AIDS services is critical to the medical, mental and spiritual health and the quality of life for people living with HIV and AIDS. This project will ensure people with HIV and AIDS have access to and are maintained in primary medical care with appropriate support services

## **Project Description**

To provide consumer advocacy and outreach services for primarily indigent, uninsured, and under insured persons living with HIV/AIDS (PLWHA) in the Ryan White Title I Washington, DC Eligible Metropolitan Area, herein referred to as DC EMA. The DC EMA covers three states and one territory comprising 19 counties

## **Project Goals**

1. To provide assistance in obtaining medical, legal, financial, and other needed supportive services to PLWHA receiving services within the DC EMA.
2. To develop appropriate outreach materials for consumers in the DC EMA
3. To provide a consumer grievance resolution process in the DC EMA



## Consumer Advocate Job Application

Name:

Email Address:

Address: including street, apt #  
City, state, and zip code

Local Phone:  
Cell Phone:

Please describe why you are interested in the Consumer Advocate position:

Describe any training/experience/activities that you feel are related to your interest in and qualifications for the Consumer Advocate position.

Describe briefly what you feel you can contribute to the Consumer Advocacy Project.

What potential barriers or conflicts do you foresee that might prevent you from attending Consumer Advocacy Project meetings, trainings, or events?

Please list two individuals who may be contacted as references:

<u>Name:</u>	<u>Position</u>	<u>Phone:</u>
1)		
2)		

I understand that accepting a Consumer Advocate position requires a commitment to participate in all trainings, attend all meetings, and maintain a reliable work schedule. I am able to make my position as a Consumer Advocate a primary commitment for the coming year.

Signature:

Date:

Mail or Fax completed application to:

NAPWA  
Consumer Advocacy Project  
8401 Colesville Road Suite 750  
Silver Spring, MD 20910  
Fax: 240-247-0574  
Phone: 240-247-0880