



SURO Application Form

Section 1: Personal Information

Last Name, First Name, MI

Date of Birth

M F
Sex

Home Telephone

Mobile Telephone

EmailAddress (required)

Mailing Address

City, State or Province

Postal Code

Country

Section 2: Emergency Contacts (minimum of one)

Last Name, First Name, MI (Relationship)

Last Name, First Name, MI (Relationship)

Home Telephone

Mobile Telephone

Home Telephone

Mobile Telephone

Mailing Address

Mailing Address

Email Address

Email Address

Section 3: Medical Information

Diagnosis and Severity

Physician's Name, Treatment Center/Hospital

Telephone

Hospital Address

City, State or Province

Postal Code

Country

How long have you attended this treatment center?

Do you have limited mobility or require any special services?

SECTION 4: TRAVEL INFORMATION

Name of airport nearest your home

City, State or Province, Country

Do you have a valid passport? (Yes or No)

Passport Number / Expiration Date

SECTION 5: ADDITIONAL INFORMATION REQUIRED TO PROCESS YOUR APPLICATION

Along with your application, the following items must be emailed (as attachments to a single email) to the specified email address by the closing date to be considered for selection in Step Up Reach Out:

- At least one letter of reference from a teacher, care provider, employer or others able to recommend your participation and one letter of support from your local foundation, association or chapter.

Personal Essay: Type a brief essay in your own words, explaining your interest in joining the Step Up Reach Out program. Describe why you are a good candidate for an international leadership program and what you hope to gain by participating. Include information about your interests and activities, past achievements and future ambitions, specific professional and educational plans, and any other information that will be useful in assessing your suitability. The length of your essay should be a minimum of 500 words. If you are faxing your application, please type or print clearly.

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SECTION 6: RELEASE OF INFORMATION/LIKENESS AND CONTACT INFORMATION

- I give permission to Bayer and The University of Texas Health Science Center at Houston, Gulf States Hemophilia and Thrombosis Center, in accordance with the laws and guidelines of my country, to provide my contact details to global, regional and local patient support societies, associations and organizations for purposes including additional training, mentorship, and leadership and promotional opportunities.
- I give my permission to Bayer and The University of Texas Health Science Center at Houston, Gulf States Hemophilia and Thrombosis Center, in accordance with the laws and guidelines of my country, to contact me regarding local activities and events of interest (e.g., speaking opportunities, traditional or social media, etc.). I understand that my permission does not represent a commitment to participate in any particular activity and I may revoke it at any time.
- I give my permission to Bayer and The University of Texas Health Science Center at Houston, Gulf States Hemophilia and Thrombosis Center, in accordance with the laws and guidelines of my country, to use photographs and video of me during Step Up Reach Out sessions and activities in publications or pamphlets for promotion of this program by organizer and sponsor, The University of Texas Health Science Center, Gulf States Hemophilia and Thrombosis Center, and Bayer, respectively.
- I give my permission to Bayer and The University of Texas Health Science Center at Houston, Gulf States Hemophilia and Thrombosis Center, to share or publish my projects and presentations from Step Up Reach Out or sessions and activities with other entities (e.g., global, regional and local patient support societies, associations and organizations) for purposes including medical congresses and publication.

Last Name, First Name

Email Address

Country

SECTION 7: DISCLAIMER OF ACCEPTANCE

Applicant acceptance is at the sole discretion of the Step Up Reach Out selection committee. The Committee consists of representatives from The University of Texas Health Science Center at Houston, Gulf States Hemophilia and Thrombosis Center, University of Colorado Hemophilia and Thrombosis Center, and University of Michigan Hemophilia and Coagulation Disorders Program. Bayer does not have a role in participant selection.