

MEDICAL TECHNOLOGIES EVALUATION PROGRAMME

STAKEHOLDER REGISTRATION FORM

The National Institute for Health and Care Excellence wants to involve organisations and individuals in the development of guidance on medical technologies. To become a stakeholder in the development of guidance on a particular technology please complete the registration form below:

Title:	Full Name:
Email:	

If registering on behalf of an organisation, please complete the below:

Organisation Name:
Job Title:
<p>Do you or your organisation have any links with or funding from the tobacco industry?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><i>If you have answered YES to the above statement please describe the nature of the conflict(s) below.</i></p>

Please indicate which group best describes your interest in the technology:

<input type="checkbox"/> Patient/ carer/ organisation	<input type="checkbox"/> Health professional
<input type="checkbox"/> Commercial company	<input type="checkbox"/> Research organisation
<input type="checkbox"/> Private healthcare	
Other:	

Please indicate which technologies you are registering an interest in:

Technology 1:

Technology 2:

Technology 3:

Please return this form to the Medical Technologies Evaluation Programme at NICE by email at medtech@nice.org.uk or by fax to **0207 0619723**