

**OFFICE OF THE PRIME MINISTER
NATIONAL AIDS CO-ORDINATING COMMITTEE SECRETARIAT**

FEEDBACK FORM FOR COMMENTS ON THE DRAFT NATIONAL HIV AND AIDS POLICY/ GREEN PAPER – E PLATFORM

NAME: (optional)

EMAIL: (optional)

TELEPHONE: (optional)

AREA OF RESIDENCE: (optional)

SECTION	PAGE NUMBER/SECTION/ TABLE #; FIGURE #	COMMENTS/SUGGESTIONS/ FEEDBACK	PROPOSED CHANGE /TEXT/ RECOMMENDATIONS
<i>Example:</i> Section 2.0-Scope of the Policy	<i>Example:</i> Page # 5 ; Table 1	<i>Insert Relevant Comments or feedback</i>	<i>Insert Relevant Recommendations, changes (if any)</i>

SECTION	PAGE NUMBER/SECTION/ TABLE #; FIGURE #	COMMENTS/SUGGESTIONS/ FEEDBACK	PROPOSED CHANGE /TEXT/ RECOMMENDATIONS

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