

**Global Ministerial Summits on Patient Safety**

**Template**

**Expression of Interest to Host the Global Ministerial Summit on Patient Safety**

1. **Name of the Country**
2. **Name and designation of the MoH official completing the form**
3. **Country’s commitment to Global Health (maximum 150 words)**
4. **Country’s commitment to Patient Safety (maximum 150 words)**
5. **The year for which the country’s proposes to host the Summit**
6. **Country’s commitment to identify the next host for continuation of the Summit series (maximum 150 words)**

**Date/year**

**Signature**