

# HeroPath™ program application



**NovoCare**  
Patient Affordability and Access Support

The HeroPath™ program matches teens and adults ages 16 to 25 with a coach to offer guidance for personal and professional life goals. It's designed to help you identify opportunities, navigate challenges, and set a course for success and self-confidence. **You do not need to be prescribed a Novo Nordisk product to apply.**

## General information

\*Indicates required field

**First name\***

**Last name\***

**Gender\***

☐ Male ☐ Female

**Date of birth\***

**Email address\***

**Address 1\***

**Address 2**

**City\***

**State\***

**ZIP code\***

**Phone number\***

**Diagnosis\***

- ☐ Acquired hemophilia
- ☐ Congenital FVII deficiency
- ☐ Factor XIII A-subunit deficiency
- ☐ Glanzmann's thrombasthenia
- ☐ Hemophilia A
- ☐ Hemophilia A with inhibitors
- ☐ Hemophilia B
- ☐ Hemophilia B with inhibitors

**Current level of education\***

- ☐ Some high school
- ☐ High school graduate
- ☐ Some vocational/technical school
- ☐ Vocational/technical school graduate
- ☐ Some college
- ☐ College graduate

**Are you currently employed?\***

☐ Yes ☐ No

## Tell us a little about yourself

\*Indicates required field

*To match you up with the right coach, we'd love to learn a little more about you. Please answer these 5 questions as best you can—there are no wrong answers!*

### 1. Career path: Which of these best describes you?\*

- ☐ I'm not sure yet what path I want to follow
- ☐ I'm thinking about college but haven't made any decisions yet
- ☐ I have a general idea of the career path I might be interested in
- ☐ I know what I want to do, and my path is just beginning
- ☐ I'm clear on my goals and I'm making progress, but I could use help with obstacles
- ☐ I'm clear on my goals and I'm confident in getting there

### 2. Friendships and personal relationships: Which of these best describes you?\*

- ☐ I don't spend a lot of time with peers outside of school, and I like it that way
- ☐ I have a few personal connections, but I'd love to meet more people
- ☐ I have friends and connections, but I'd like to connect more deeply with others
- ☐ I have a great social life that I'm happy with

### 3. Dating relationships: Which of these best describes you?\*

- ☐ I'm interested in dating but not sure now is the right time for a relationship
- ☐ I'd like to work on my confidence in dating and relationships
- ☐ Dating is new territory for me, and I have a lot to learn
- ☐ I'm currently dating but could use some relationship advice
- ☐ I'm happy with my dating life
- ☐ I'm in a committed relationship or married

### 4. Growing up and moving on: Which of these best describes you?\*

- ☐ I'm not in a hurry to be on my own
- ☐ I'd like to be more autonomous, but my parents and I are a little concerned about my ability to take care of myself
- ☐ I'd like to be more autonomous and my parents think I'm ready, but I'm still a little concerned about my ability to take care of myself
- ☐ I'm ready to take the next step in life, but I'm not confident about making good decisions
- ☐ I'm ready to take the next step, and I'm confident in my ability to be independent
- ☐ I'm already living independently

## Tell us a little about yourself (continued)

\*Indicates required field

### 5. Technology: Which of these best describes you?\*

- ☐ I rarely or never use computers or smart devices
- ☐ I use tech as a tool for getting things done but not as entertainment
- ☐ I'm online quite a bit (social media, games, etc.), but I still spend plenty of time disconnected
- ☐ I'm more connected to the virtual world than the real world!

## Essay or video submission\*

\*Indicates required field

*In 150 words or fewer, please explain why you would like to participate in HeroPath™ and what you hope to gain from the experience.*

*Not one for writing? You can provide a 60-second video explanation instead. Just upload your video to YouTube and paste the URL in the text field below.*

### **A few guidelines to increase the chances that your application will be considered for final selection:**

- Avoid mentioning any treatments, including products or drug names (brand name or generic), dosages, or product manufacturers
- Avoid profanities and inappropriate language
- **Don't report side effects of taking any medications on this application**—instead, report them by:
  - Calling 1-800-727-6500
  - OR contacting the Food and Drug Administration (FDA) directly at [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or 1-800-FDA-1088

*Response continued on next page*

## Essay or video submission (continued)\*

\*Indicates required field

- ☐ If eligible, I understand and authorize the sharing of my personal health information with Novo Nordisk, the sponsor of the HeroPath™ program, and its partners supporting the program as necessary to: provide services to me under such program; ensure effective administration and operations of such program; transition my support; or share my information with service providers for the purpose of aggregation or de-identification. This information may include the personal information provided by me for HeroPath™ program enrollment, payer-related information received from my health insurer, and any prescription, fulfillment, and other information provided by my pharmacy. Should I begin receiving prescription benefits from a federal, state, or other government-funded program at any time, I will no longer be eligible to participate in this program. You may also contact me periodically in order to verify that my eligibility for the program has not changed. I also understand that the Program may contact me as necessary related to the Program, information related thereto, and status of my application to ensure appropriate facilitation of the Program.