## APPLICATION FOR THE RETURN OF THE CHILD

The Hague Convention of 25 October 1980 on the Civil Aspects of International Child Abduction

REQUESTING CENTRAL AUTHORITY / APPLICANT*	REQUESTED CENTRAL AUTHORITY	
AFFLICANT		
With regard to the child		
	(Child's full name)	
Who reaches the age of 16 years in		
	(specify the year)	
1. Personal data of the child and his/her pare	ents	
1.1. The Child		
NAME:		
Date and place of birth:		
Citizenship:		
Permanent/ habitual place of residence before the removal or retention:		
Permanent/ habitual place of residence before t	he removal or retention:	
Passport No. or other identity document No., if a		
	available:	
Passport No. or other identity document No., if a	available:	
Passport No. or other identity document No., if a	available:	
Passport No. or other identity document No., if a Description of the appearance and photo, if ava	available:	
Passport No. or other identity document No., if a Description of the appearance and photo, if ava	available:	
Passport No. or other identity document No., if a Description of the appearance and photo, if ava 1.2. Parents  Mother	available:	

Occupation:
Permanent residence:
Contact telephone No., e-mail:
Passport No. or other identity document No., if available:
Father
NAME:
Date and place of birth:
Citizenship:
Occupation:
Permanent residence:
Contact telephone No., e-mail:
Passport No. or other identity document No., if available:
1.3. Date and place of marriage registration:
1.4. Date and place of dissolution of marriage:
2. The requesting person or body
(who exercised the right of custody of the child before the wrongful removal or retention)
NAME:
Citizenship of the Applicant (for individuals):
Occupation of the Applicant (for individuals):
Address:
Contact telephone No., e-mail:
Passport No. or other identity document No., if available:

Relationship to the Child:
Full name and address of the legal adviser, if any:
3. Probable whereabouts of the of the child
3.1. Identification data of the person with whom the child is presumed to be
NAME:
Date and place of birth:
Citizenship:
Occupation:
Last known address:
Contact telephone No., e-mail:
Passport No. or identity card No., if available:
Special signs and a photo, if available (see Annex):
3.2. Another address, where the Child can be expected to stay (if different from paragraph 3.1):
3.3. Other persons who can provide additional information about the whereabouts of the Child:
4. Time, place and circumstances of wrongful removal or retention
5. Factual and legal basis for the application (for example, the court's decision)
6. Civil cases pending at the court's consideration
7. The person to whom the Child should be returned
NAME:
Date and place of birth:
Address:

Contact telephone No., e-mail:		
7.1. Proposed measures to return the Child:		
8. Notes		
9. List of attached documents		
Date		
	Applicant's signature and / or seal	
	of the requesting Central Authority	