

<b>Title</b>	<b>Draft Cooperation Request Recommended Model Form under the HCCH 1996 Child Protection Convention &amp; Explanatory Note</b>
<b>Document</b>	<b>Prel. Doc. No 11 of July 2023</b>
<b>Author</b>	PB
<b>Agenda Item</b>	Item TBD
<b>Mandate(s)</b>	- C&R No 41 of the Seventh Meeting of the Special Commission on the practical operation of the 1980 and 1996 Conventions
<b>Objective</b>	- To introduce a draft Cooperation Request Recommended Model Form for consultation with HCCH Members and the Contracting States to the 1996 Child Protection Convention with a view, if possible, to having it approved at the Eighth Meeting of the Special Commission in October 2023. - HCCH Members and Contracting States are invited to provide comments, making references to item numbers, <b>before 8 September 2023</b> by writing to <a href="mailto:secretariat@hcch.net">secretariat@hcch.net</a> and indicating in the subject line of the e-mail: "SC 2023 – Cooperation Form 1996 – [Name of State]"
<b>Action to be Taken</b>	For Decision <input type="checkbox"/> For Approval <input type="checkbox"/> For Discussion <input checked="" type="checkbox"/> For Action / Completion <input type="checkbox"/> For Information <input type="checkbox"/>
<b>Annexes</b>	Annex I – Cooperation Request Model Form
<b>Related Documents</b>	- <a href="#">Prel. Doc. No 9 of July 2023</a> - Draft Country Profile for the 1996 Child Protection Convention - <a href="#">Prel. Doc. No 10 of July 2023</a> - Revised Recommended Request for Return Form and new Recommended Request for Access Form under the HCCH 1980 Child Abduction Convention & Explanatory Note

# Draft Cooperation Request Recommended Model Form under the HCCH 1996 Child Protection Convention & Explanatory Note

## Explanatory Note

### I. Background

- 1 At the Seventh Meeting of the Special Commission on the Practical Operation of the 1980 Child Abduction Convention and the 1996 Child Protection Convention (2017 SC), there was a discussion about developing a cooperation request model form to facilitate the exchange of information between the authorities of the Contracting States to the 1996 Child Protection Convention (1996 Convention).<sup>1</sup> The discussion was prompted by question No 23 of the *Questionnaire on the Practical Operation of the 1996 Convention* (Prel. Doc. No 1 of December 2016), which requested information from States regarding challenges or questions that had arisen in providing or obtaining reports or information under Article 32, 33 or 34. Considering the general support from the SC participants for the development of a cooperation request model form, the 2017 SC adopted Conclusion & Recommendation (C&R) No 41:

“The Special Commission recommends that the Permanent Bureau, in consultation with interested Contracting States, develop a model Co-operation Request Form, that may be used for any request under the framework of the 1996 Convention.”

- 2 Following this recommendation, the PB developed a draft Cooperation Request Recommended Model Form for consultation with HCCH Members and Contracting States to the 1996 Child Protection Convention. The draft Cooperation Request Recommended Model Form is meant for discussion at the Eighth Meeting of the Special Commission in October 2023 with a view, if possible, to have it approved. The draft Cooperation Request Recommended Model Form intends to be a compact, recommended (not compulsory) model document to assist Central Authorities in making requests under Articles 30 to 32 and 34 to 36 of the 1996 Convention. The draft Cooperation Request Recommended Model Form is available in Annex I.

### II. Exclusion from Scope

- 3 The PB excluded requests for the cross-border placement of a child under Article 33 of the 1996 Convention from the scope of the draft Cooperation Request Recommended Model Form. Notwithstanding the reference to “any request under the framework of the 1996 Convention” in the text of C&R No 41, the discussion in support of this C&R was limited in scope to requests submitted under Articles 32, 34 and 35 of the 1996 Convention.<sup>2</sup> Furthermore, the nature, specificity and complexity of requests under Article 33 may require a separate, targeted analysis compared to the other cooperation Articles of the 1996 Convention. For that reason, the draft Cooperation Request Recommended Model Form presents a clear indication in its header that it is aimed at “requests between Central Authorities under Articles 30-32 and 34-36” with a footnote explaining that the form is not meant to be used for requests under Article 33.

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<sup>1</sup> See the 2017 SC Report of Meeting No 7, para. 4, on the “Requests submitted under Articles 32, 34 and 35 (Prel. Doc. No 1 [SC 2017] Questions 20, 28 and 29)”, discussed under agenda item No 16 “Co-operation among Central Authorities under the 1996 Convention”, available at the Secure Portal of the HCCH website at [www.hcch.net](http://www.hcch.net), under “Special Commission Meetings”, then “Previous Special Commissions on the 1980 Child Abduction Convention & the 1996 Child Protection Convention”.

<sup>2</sup> The PB has also suggested that the form be used for activities of cooperation under Art. 36 of the Convention by adding a tick box under “Type of Request and / or other cooperation matter” that refers to the situation where “the requesting Central Authority wishes to provide information about the danger involved and the measures of protection taken or under consideration in the requesting State in relation to a child whose habitual residence or presence has changed to the requested State (Art. 36).”

### **III. Alignment with Other Forms and SC Documents**

- 4 The draft Cooperation Request Recommended Model Form is aligned, to the extent possible and with the necessary adaptations, with the language used in the revised Return and Access Forms under the 1980 Child Abduction Convention (Prel. Doc. No 10 of July 2023). To the extent possible, the draft is also aligned with the list of services provided by Central Authorities under the 1996 Convention appearing in the draft Country Profile for that Convention, item 7.5 (Prel. Doc. No 9 of July 2023).
- 5 Following the same approach as in the Return and Access Forms, the draft Cooperation Request Recommended Model Form allows the requesting State to fill in one request for multiple children. The structure, in the form of tick boxes, would allow, as for the Return and Access Forms, Central Authorities to complete such forms online, regardless of the possibility of submitting the form electronically. It is to be noted that if the Cooperation Request Recommended Model Form were to be made available in different languages it would reduce the costs of translation for Central Authorities.<sup>3</sup>

### **IV. Possible C&R for the Consideration of the 2023 SC**

- 6 The SC approves the Cooperation Request Recommended Model Form for the purpose of requests under Articles 30 to 32 and 34 to 36 of the 1996 Child Protection Convention as suggested in Prel. Doc. No 11 of July 2023.

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<sup>3</sup> See the 2017 SC Report of Meeting No 7, para. 9.

## **ANNEXES**

**HCCH 1996 CHILD PROTECTION CONVENTION**

**COOPERATION REQUEST RECOMMENDED MODEL FORM**

*For requests between Central Authorities under Articles 30-32 and 34-36<sup>4</sup>*

*Pursuant to Article 41 of the Convention, personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted.*

**1. Identification of the Request**

<b>File No in the requesting State</b>	[To be completed when submitting the form]
<b>File No in the requested State</b>	[To be completed when the form is received]
<b>Name of applicant(s)</b>	Click or tap here to enter text.
<b>Initials of the child<sup>5</sup> concerned</b>	Click or tap here to enter text.
<b>Is this request confidential?</b> <i>According to Article 42, "The authorities to whom information is transmitted shall ensure its confidentiality, in accordance with the law of their State".</i>	<input type="checkbox"/> Yes. Please provide any necessary information in relation to the non-disclosure of information related to the present request, according to the law of the requesting State: Click or tap here to enter text.  <input type="checkbox"/> No

**2. Requesting Central Authority**

<b>State</b>	Choose an item.
<b>Territorial unit, if applicable</b>	Click or tap here to enter text.
<b>Government entity or department</b>	Click or tap here to enter text.
<b>Address</b>	Click or tap here to enter text.
<b>Contact person 1</b> <i>For the present request</i>	Name and function: Click or tap here to enter text.  Direct contact details: Click or tap here to enter text.  Preferred language(s) of communication: Click or tap here to enter text.
<b>Contact person 2</b> <i>For the present request</i>	Name and function: Click or tap here to enter text.  Direct contact details: Click or tap here to enter text.  Preferred language(s) of communication: Click or tap here to enter text.
<b>Other relevant information about the requesting Central Authority in relation to the present request</b>	Click or tap here to enter text.

**3. Requested Central Authority**

<b>State</b>	Choose an item.
<b>Territorial unit, if applicable</b>	Click or tap here to enter text.
<b>Government entity or department</b>	Click or tap here to enter text.
<b>Address</b>	Click or tap here to enter text.

<sup>4</sup> This Cooperation Request Model Form may be used for general requests under the framework of the HCCH 1996 Child Protection Convention. This form is **not** meant to be used in cases of the obligatory consultation instituted by Art. 33 of the Convention, when an authority with jurisdiction under Arts 5 to 10 of the Convention is contemplating the placement or the provision of care of a child to take place in another Contracting State.

<sup>5</sup> If this request concerns more than one child, please include the initials of all the children concerned. In that case, the word "child" used in this form should be read as "children".

<b>Ground(s) for the request</b>	<input type="checkbox"/> Child is, or could be, located in the requested State <input type="checkbox"/> Property of the child is located in the requested State <input type="checkbox"/> Child is a national of the requested State <input type="checkbox"/> Child is habitually resident in the requested State <input type="checkbox"/> Child or family member has resided in the requested State <input type="checkbox"/> Child has another type of connection with the requested State <input type="checkbox"/> The requested State is or was seised of an application for divorce or legal separation of the child's parents, or for annulment of their marriage <input type="checkbox"/> There are or there have been other proceedings in the requested State that relate to the child's person or property <input type="checkbox"/> Other: Click or tap here to enter text.
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#### 4. Request and Cooperation

<b>Type of request and / or other cooperation matter</b> <i>Please tick all the boxes that apply</i>	<input type="checkbox"/> A request concerning <b>rights of custody</b> , including rights relating to the care of the person of the child <input type="checkbox"/> A request to organise or secure effective exercise of <b>rights of access / contact</b> in the requested State <input type="checkbox"/> A request concerning a child subject to <b>international abduction</b> <input type="checkbox"/> A request concerning a <b>runaway, abandoned or trafficked child</b> <input type="checkbox"/> A request for a <b>report on the situation of a child habitually resident</b> in the requested State <input type="checkbox"/> A request concerning <b>refugee, internationally displaced or child(ren) without a habitual residence</b> <input type="checkbox"/> A request concerning the <b>property</b> of the child <input type="checkbox"/> A request that the competent authorities of the requested State decide on the <b>recognition or non-recognition</b> of a measure taken in the requesting State <input type="checkbox"/> A request that the competent authorities of the requested State <b>declare enforceable or register for the purpose of enforcement</b> measures taken in the requesting State <input type="checkbox"/> The requesting Central Authority wishes to <b>provide information about the danger involved and the measures of protection taken or under consideration</b> in the requesting State in relation to a child whose habitual residence or presence has changed to the requested State (Art. 36) <input type="checkbox"/> Other: Click or tap here to enter text.
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<p><b>Is the child / Are the children believed to be <b>currently</b> at risk of harm?</b></p>	<p><input type="checkbox"/> Yes Please provide more information: <a href="#">Click or tap here to enter text.</a></p> <p><input type="checkbox"/> No</p>
<p><b>Could the child(ren) be exposed to other possible harm and if so what kind?</b></p>	<p><input type="checkbox"/> Yes Please provide more information: <a href="#">Click or tap here to enter text.</a></p> <p><input type="checkbox"/> No</p>
<p><b>Service(s) requested</b> <i>Please tick all the boxes that apply</i></p>	<p><input type="checkbox"/> Assistance in obtaining information on the relevant laws and procedures in the requested State relating to the protection of children</p> <p><input type="checkbox"/> Establishment of contact with the Central Authority and / or the competent authorities in the requested State to find out the kind of assistance and services such authorities could provide</p> <p><input type="checkbox"/> Transmission of the request to the Central Authority or to the competent authorities in the requested State</p> <p><input type="checkbox"/> Assistance in discovering the whereabouts of a child that may be present and in need of protection within the territory of the requested State</p> <p><input type="checkbox"/> Assistance in obtaining information relevant to the protection of the child when such information is available in the requested State (e.g., previous judicial proceedings involving the child)</p> <p><input type="checkbox"/> Provision of information on the suitability of a parent residing in the requested State to exercise access / contact and on the conditions under which such access / contact is to be exercised</p> <p><input type="checkbox"/> Assistance in taking provisional or urgent measures of protection, including in relation to their implementation</p> <p><input type="checkbox"/> Assistance in securing the return of the child to the country of habitual residence</p> <p><input type="checkbox"/> Assistance in obtaining private legal counsel or mediation services, where needed in the requested State</p> <p><input type="checkbox"/> Assistance in providing or facilitating the provision of legal aid and advice in the requested State</p> <p><input type="checkbox"/> Assistance in initiating judicial or administrative proceedings in the requested State</p> <p><input type="checkbox"/> Assistance in providing such administrative arrangements as may be necessary to protect the child</p> <p><input type="checkbox"/> Assistance concerning the recognition and enforcement of decisions in the requested State</p> <p><input type="checkbox"/> Assistance concerning requests under Articles 8 and 9 of the Convention</p> <p><input type="checkbox"/> Assistance in obtaining the Certificate under Article 40 or, in case the Central Authority is competent to draw up the certificate, a request of issuance of the Certificate</p>

	<input type="checkbox"/> Referral to other governmental and / or non-governmental organisations for assistance in the requested State <input type="checkbox"/> Other:
<b>If necessary, please provide additional information concerning this request</b>	Click or tap here to enter text.

### 5. Information Concerning the Child Subject of the Request

*If the request concerns more than two children, please add more rows as appropriate*

<b>Child (1)</b>			
<b>Identity of the child</b>			
<b>Family name(s)</b>		Click or tap here to enter text.	
<b>Given name(s)</b>		Click or tap here to enter text.	
<b>Alias</b>		Click or tap here to enter text.	
<b>Place and date of birth</b>		[Place], [dd/mm/yyyy]	
<b>Nationality(ies)</b>		Click or tap here to enter text.	
<b>Gender</b>		Click or tap here to enter text.	
<b>Identity document(s), number(s) and validity dates thereof (if applicable)</b>		Click or tap here to enter text.	
<b>Travel document(s), number(s) and validity dates thereof (if applicable)</b>		Click or tap here to enter text.	
<b>Place of habitual residence</b>		Click or tap here to enter text.	
<b>Language(s) (please specify for each language: spoken, written, understood)</b>		Click or tap here to enter text.	
<b>Physical description of the child</b>			
<i>Please complete this section only if relevant to the request (e.g., requests to find the whereabouts of the child)</i>			
<b>Height</b>	Click or tap here to enter text.	<b>Weight</b>	Click or tap here to enter text.
<b>Hair Colour</b>	Click or tap here to enter text.	<b>Eye Colour</b>	Click or tap here to enter text.
<b>Additional characteristics (e.g., scars or birth marks)</b>		Click or tap here to enter text.	
<b>Medical conditions (if necessary, please provide further information on a separate sheet)</b>		Click or tap here to enter text.	
<b>Are recent photos of the child attached?</b>		<input type="checkbox"/> Yes Please specify, if known, when the photos were taken: Click or tap here to enter text. <input type="checkbox"/> No	
<b>Legal parents and other legal or customary guardians</b>			
<b>Is the child in the care of the legal parents or other legal or customary guardians?</b>		<input type="checkbox"/> Yes, the child is in the care of one or both parents <input type="checkbox"/> Yes, the child is in the care of a guardian or an institution (e.g., an alternative care arrangement) Please provide information about the person or institution who is entrusted with care of the child and under which conditions or circumstances: Click or tap here to enter text. <input type="checkbox"/> No Please provide details about the situation of the child: Click or tap here to enter text.	
<b>Additional information</b>			



If necessary, please provide additional information concerning the child (e.g., siblings)		Click or tap here to enter text.	
<b>Child (2)</b>			
<i>Please complete if appropriate</i>			
<b>Identity of the child</b>			
Family name(s)		Click or tap here to enter text.	
Given name(s)		Click or tap here to enter text.	
Alias		Click or tap here to enter text.	
Place and date of birth		[Place], [dd/mm/yyyy]	
Nationality(ies)		Click or tap here to enter text.	
Gender		Click or tap here to enter text.	
Identity document(s), number(s) and validity dates thereof (if applicable)		Click or tap here to enter text.	
Travel document(s), number(s) and validity dates thereof (if applicable)		Click or tap here to enter text.	
Place of habitual residence		Click or tap here to enter text.	
Language(s) (please specify for each language: spoken, written, understood)		Click or tap here to enter text.	
<b>Physical description of the child</b>			
<i>Please complete this section only if relevant to the request (e.g., requests to find the whereabouts of the child)</i>			
Height	Click or tap here to enter text.	Weight	Click or tap here to enter text.
Hair Colour	Click or tap here to enter text.	Eye Colour	Click or tap here to enter text.
Additional characteristics (e.g., scars or birth marks)		Click or tap here to enter text.	
Medical conditions (if necessary, please provide further information on a separate sheet)		Click or tap here to enter text.	
Are recent photos of the child attached?		<input type="checkbox"/> Yes Please specify, if known, when the photos were taken: Click or tap here to enter text. <input type="checkbox"/> No	
<b>Legal parents and other legal or customary guardians</b>			
Is the child in the care of the parents or other legal or customary guardians?		<input type="checkbox"/> Yes, the child is in the care of one or both parents <input type="checkbox"/> Yes, the child is in the care of a guardian or an institution (e.g., an alternative care arrangement) Please provide information about the person or institution who is entrusted with care of the child and under which conditions or circumstances: Click or tap here to enter text. <input type="checkbox"/> No Please provide details about the situation of the child: Click or tap here to enter text.	
<b>Additional information</b>			
If necessary, please provide additional information concerning the child (e.g., siblings)		Click or tap here to enter text.	

## 6. Applicant(s)

*If the request concerns more than one applicant, please add additional rows as appropriate*

### Identity and contact details of applicant

<b>Family name(s)</b>	Click or tap here to enter text.
<b>Given name(s)</b>	Click or tap here to enter text.
<b>Alias</b>	Click or tap here to enter text.
<b>Place and date of birth</b>	[Place], [dd/mm/yyyy]
<b>Relationship to the child</b>	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Legal or customary guardian <input type="checkbox"/> Other. Please specify: Click or tap here to enter text.
<b>Nationality(ies)</b>	Click or tap here to enter text.
<b>Gender</b>	Click or tap here to enter text.
<b>Identity document(s), number(s) and validity dates thereof (if applicable)</b>	Click or tap here to enter text.
<b>Travel document(s), number(s) and validity dates thereof (if applicable)</b>	Click or tap here to enter text.
<b>Address (if an institution, please also provide the name of a contact person)</b>	Click or tap here to enter text.
<b>Telephone number(s)</b>	Mobile: Click or tap here to enter text.  Home: Click or tap here to enter text.  Office: Click or tap here to enter text.
<b>E-mail address(es)</b>	Click or tap here to enter text.
<b>Fax number(s)</b>	Click or tap here to enter text.
<b>Language(s) (please specify for each language: spoken, written, understood)</b>	Click or tap here to enter text.
<b>Legal adviser(s) of the applicant, if applicable</b>	
<b>Is the applicant assisted by legal adviser(s)?</b>	<input type="checkbox"/> Yes Please provide the name, title and other relevant information: Click or tap here to enter text.  <input type="checkbox"/> No

## 7. Legal Parents and/ or Legal or Customary Guardians

<b>Legal parent (1)</b>	
<b>Is this person already listed in section 6 above?</b> <i>If yes, please skip to "Legal Parent (2)"</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Family name(s)</b>	Click or tap here to enter text.
<b>Given name(s)</b>	Click or tap here to enter text.
<b>Alias</b>	Click or tap here to enter text.
<b>Place and date of birth</b>	[Place], [dd/mm/yyyy]
<b>Relationship to the child(ren)</b>	<input type="checkbox"/> Mother <input type="checkbox"/> Father
<b>Nationality(ies)</b>	Click or tap here to enter text.
<b>Gender</b>	Click or tap here to enter text.
<b>Identity document(s), number(s) and validity dates thereof (if applicable)</b>	Click or tap here to enter text.
<b>Travel document(s), number(s) and validity dates thereof (if applicable)</b>	Click or tap here to enter text.
<b>Language(s) (please specify for each language: spoken, written, understood)</b>	Click or tap here to enter text.
<b>Legal parent (2)</b>	

*Pursuant to Article 41 of the Convention, personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted.*

Is this person already listed in section 6 above? <i>If yes, please skip to "Relationship status of the parents"</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Family name(s)	Click or tap here to enter text.
Given name(s)	Click or tap here to enter text.
Alias	Click or tap here to enter text.
Place and date of birth	[Place], [dd/mm/yyyy]
Relationship to the child(ren)	<input type="checkbox"/> Mother <input type="checkbox"/> Father
Nationality(ies)	Click or tap here to enter text.
Gender	Click or tap here to enter text.
Identity document(s), number(s) and validity dates thereof (if applicable)	Click or tap here to enter text.
Travel document(s), number(s) and validity dates thereof (if applicable)	Click or tap here to enter text.
Language(s) (please specify for each language: spoken, written, understood)	Click or tap here to enter text.
<b>Relationship status of the parents</b>	
Relationship	<input type="checkbox"/> Married <input type="checkbox"/> Other form of union (e.g., registered partnership) <input type="checkbox"/> Unmarried cohabitation <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Other: Click or tap here to enter text.
Are there ongoing divorce / legal proceedings or ongoing alternative dispute resolution procedures (e.g., mediation) that may affect the custody rights concerning the child covered by this Request?	<input type="checkbox"/> Yes <input type="checkbox"/> No Please specify: Click or tap here to enter text.
<b>Legal or customary guardian(s)</b> <i>If the request concerns more than one legal or customary guardian, please add additional rows as appropriate</i>	
Is this person already listed in section 6 above? <i>If yes, please skip to the next section</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Family name(s)	Click or tap here to enter text.
Given name(s)	Click or tap here to enter text.
Alias	Click or tap here to enter text.
Place and date of birth	[Place], [dd/mm/yyyy]
Relationship to the child(ren)	Please specify: Click or tap here to enter text.
Nationality(ies)	Click or tap here to enter text.
Gender	Click or tap here to enter text.
Identity document(s), number(s) and validity dates thereof (if applicable)	Click or tap here to enter text.
Travel document(s), number(s) and validity dates thereof (if applicable)	Click or tap here to enter text.
Language(s) (please specify for each language: spoken, written, understood)	Click or tap here to enter text.

## 8. Other Relevant Information Concerning the Request

*Pursuant to Article 41 of the Convention, personal data gathered or transmitted under the Convention shall be used only for the purposes for which it was gathered or transmitted.*

<b>Are there any ongoing administrative or judicial proceedings in the requesting State, not mentioned in the previous sections of this form, that are relevant to the present request?</b>	<input type="checkbox"/> Yes Please provide more information: <a href="#">Click or tap here to enter text.</a> <input type="checkbox"/> No
<b>Has the child / Have the children ever been involved with the welfare authorities?</b>	<input type="checkbox"/> Yes Please provide more information: <a href="#">Click or tap here to enter text.</a> <input type="checkbox"/> No
<b>Please provide any other additional information relevant to the request and annex documentation as necessary (e.g., copy of judicial decisions of protective measures in the past)</b>	<a href="#">Click or tap here to enter text.</a>

**Signature of the Central Authority employee:** [Click or tap here to enter text.](#)

**Full Name of the Central Authority employee:** [Click or tap here to enter text.](#)

**Place:** [Click or tap here to enter text.](#)

**Date:** [Click or tap here to enter text.](#)

## Annex

### List of documents attached to this form<sup>1</sup>

<b>1</b>	<b>Concerning the child(ren)</b>	
(a)	<input type="checkbox"/>	Copy of the child's identity card(s) / travel document(s)
(b)	<input type="checkbox"/>	Copy of the child's birth certificate
(c)	<input type="checkbox"/>	Copy of relevant decision(s) and / or agreement(s) relating of the child (e.g., judicial decisions attributing rights of custody, access, designating a guardian or placing the child in alternative care, ordering protective measures or the return of the child to the country of habitual residence)
(d)	<input type="checkbox"/>	Recent photograph of the child
(e)	<input type="checkbox"/>	Copy of medical prescription for treatment or any other medical records that are relevant to the request, if applicable
(f)	<input type="checkbox"/>	Copy of school certificates or school register
(g)	<input type="checkbox"/>	Other: Click or tap here to enter text.
<b>2</b>	<b>Concerning the applicant(s)</b>	
(a)	<input type="checkbox"/>	Copy of the applicant's identity card(s)
(b)	<input type="checkbox"/>	Legal aid form, if applicable
(c)	<input type="checkbox"/>	Power of Attorney, if applicable
(d)	<input type="checkbox"/>	Other: Click or tap here to enter text.
<b>3</b>	<b>Concerning the parent(s)</b>	
(a)	<input type="checkbox"/>	Copy of the marriage or registered partnership certificate of the child's parents, if applicable
(b)	<input type="checkbox"/>	Copy of the divorce decree of the child's parents or the official document stating the end of their registered partnership (if applicable)
(c)	<input type="checkbox"/>	Other: Click or tap here to enter text.
<b>4</b>	<b>Other documents</b>	
		<i>Please insert additional rows below, if necessary</i>
(a)	<input type="checkbox"/>	Click or tap here to enter text.
(b)	<input type="checkbox"/>	Click or tap here to enter text.

<sup>1</sup> According to Art. 43 of the Convention, "All documents forwarded or delivered under this Convention shall be exempt from legalisation or any analogous formality". This list is merely exemplary and does not purport to be comprehensive nor mandatory.