

## Application for Assistance in Visitation or Contacts with Child

《Note》

- Before completing this form, please read the ‘Guide to making an application for assistance in visitation or contacts with child’ and follow the instructions.
- Please provide as much information as possible.
- Please indicate  in the appropriate boxes.

1. Applicant								
Name	English	Last name		Middle name(if any)		First name		
	Japanese (Chinese character, if possible)	Last name			First name			
	Other Language (if any)	Language name	Last name		Middle name(if any)		First name	
Date of birth		Day		Month		Year		
Nationality			Occupation					
Relation with the child		<input type="checkbox"/> Father		<input type="checkbox"/> Mother		<input type="checkbox"/> Other ( )		
Domicile or residence		Country	Address					
Telephone no.		Country code + ( ) – (0) – –						
Mobile telephone no.		Country code + ( ) – (0) – –						
Fax no.		Country code + ( ) – (0) – –						
E-mail address		@						
Identity card		Type of identity card	Issuing country and organization		No.		Expire date Day    Month    Year /    /	
Details of your legal adviser (if you are instructing one in relation to this application)								
Name	English	Last name		Middle name(if any)		First name		
	Japanese (Chinese character, if possible)	Last Name			First Name			
Location of office		Country	Address					
Telephone no.		Country code + ( ) – (0) – –						
Fax no.		Country code + ( ) – (0) – –						
E-mail address		@						
License		Country	Type of license					
Preferred contact person with the Central Authority		<input type="checkbox"/> This legal adviser <input type="checkbox"/> Applicant <input type="checkbox"/> Either one will be fine						

2. Child pertaining to the application					
Name	English	Last name	Middle name(if any)	First name	
	Japanese (Chinese character, if possible)	Last name		First name	
	Other Language (if any)	Language name	Last name	Middle name(if any)	First name
Alias(if any)		Last name		First name	
Date of birth		Day	Month	Year	
Nationality			Sex	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Place of birth (if Japanese, registered domicile)		Country	Address		
Habitual residence immediately before the visitation or other contacts became unable to be made		Country	Address		
		Length of residence and other relevant information about child's habitual residence			
Current domicile or residence		Country	Address		
Telephone no.		Country Code + (            ) – (0)            –            –			
Mobile Telephone no.		Country Code + (            ) – (0)            –            –			
Fax no.		Country Code + (            ) – (0)            –            –			
E-mail address		@			
Passport (Please provide information of all passport possessed)		Issuing country	No.	Expire date Day    Month    Year /       /	
Identity card (Only if you cannot provide passport information)		Type of identity card	Issuing country and organization	No.	Expire date Day    Month    Year /       /
Description		Height	Weight	Color of hair	Color of eyes
		Other			
Other useful information to identify the location		Ex: Persons who might be able to provide additional information (name, address, telephone no., e-mail address, relation with the child), school, nursery or hospital where child may attend or visit etc.			



4. Necessary matters to clarify that the applicant is entitled to visitation or other contacts with the child under the laws and regulations of the state or territory where the child held his/her habitual residence immediately before the visitation or other contacts with the child became unable to be made and that the visitation or other contacts with the child by applicant has been interfered

Explanation to clarify that the applicant is entitled to visitation or other contacts with the child under the laws and regulations of the state or territory where the child held his/her habitual residence immediately before the visitation or other contacts with the child became unable to be made	Legal basis: name of laws and regulations	Provision no.	
	Explanation		
Time, place and circumstances that the visitation or other contacts with the child became unable to be made	Time: Day	Month	Year
	Place: Country	Name of place or address	
	Circumstances		
Circumstances that the visitation or other contacts with the child by applicant has been interfered	Ex: whether the person who is considered to have done a removal or retention of the child or the person who is considered to live together with the child has contacted you, whether he/she has declared his/her intention not to return the child etc.		





To Minister for Foreign Affairs of Japan

Day                      Month                      Year \_\_\_\_\_

The statement in this application and attached documents is true and correct, and

(Please indicate whether you are applying for visitation or contact with the child in Japan or in a Contracting State other than Japan)

- under the provision of Article 21 of the Convention on the Civil Aspects of International Child Abduction and Article 16(1) of the Act for Implementation of the Convention on the Civil Aspects of International Child Abduction, I file an application for assistance in visitation or other contacts with the child in Japan (Assistance in Visitation or Contact with Child in Japan).
- under the provision of Article 21 of the Convention on the Civil Aspects of International Child Abduction and Article 21(1) of the Act for Implementation of the Convention on the Civil Aspects of International Child Abduction, I file an application for assistance in visitation or other contacts with the child in a Contracting State other than Japan (Assistance in Visitation or Contact with Child in Foreign State).

Signature of Applicant \_\_\_\_\_

(Please sign in applicant's own hand)