

# REQUEST FOR RETURN

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

Concerns the child: \_\_\_\_\_

who will attain the age of 16 on: \_\_\_\_\_

### **I IDENTITY OF THE CHILD AND ITS PARENTS**

#### **Child:**

- surname and first names: \_\_\_\_\_
- date and place of birth: \_\_\_\_\_
- habitual residence before removal or retention: \_\_\_\_\_
- passport or identity card no, if any: \_\_\_\_\_
- description and photo, if possible: \_\_\_\_\_

#### **Parents:**

##### *Mother:*

- surname and first names: \_\_\_\_\_
- date and place of birth: \_\_\_\_\_
- nationality: \_\_\_\_\_
- occupation: \_\_\_\_\_
- habitual residence: \_\_\_\_\_
- phone number, if any: \_\_\_\_\_
- passport or identity card no, if any: \_\_\_\_\_

##### *Father:*

- surname and first names: \_\_\_\_\_
- date and place of birth: \_\_\_\_\_
- nationality: \_\_\_\_\_
- occupation: \_\_\_\_\_
- habitual residence: \_\_\_\_\_
- phone number, if any: \_\_\_\_\_
- passport or identity card no, if any: \_\_\_\_\_

**Date and place of marriage:** \_\_\_\_\_

**II REQUESTING INDIVIDUAL OR INSTITUTION**

(Who actually exercised custody before removal or retention)

- surname and first names: \_\_\_\_\_
- nationality if individual applicant: \_\_\_\_\_
- occupation if individual applicant: \_\_\_\_\_
- address: \_\_\_\_\_
- passport or identity card no, if any: \_\_\_\_\_
- relation to the child: \_\_\_\_\_
- name and address of legal adviser,  
if any \_\_\_\_\_

**III PLACE WHERE CHILD IS THOUGHT TO BE**

**Information concerning the person alleged to have removed or retained the child:**

- surname and first names: \_\_\_\_\_
- date and place of birth, if known: \_\_\_\_\_
- nationality if known: \_\_\_\_\_
- occupation: \_\_\_\_\_
- last known address: \_\_\_\_\_
- passport or identity card no, if any: \_\_\_\_\_
- description and photo, if possible: \_\_\_\_\_

**Address where the child is thought to be**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- **Other persons who might be able to supply  
additional information relating to the  
whereabouts of the child:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IV TIME, PLACE, DATE AND CIRCUMSTANCES OF THE WRONGFUL  
REMOVAL OR RETENTION:**

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**V FACTUAL AND LEGAL GROUNDS JUSTIFYING THE REQUEST:**

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**VI CIVIL PROCEEDINGS IN PROGRESS:**

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**VII CHILD IS TO BE RETURNED TO:**

- surname and first names: \_\_\_\_\_
- date and place of birth: \_\_\_\_\_
- address: \_\_\_\_\_
- telephone number: \_\_\_\_\_
  
- proposed arrangements for return of  
the child: \_\_\_\_\_

**VIII OTHER REMARKS**

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**IX LIST OF DOCUMENTS ATTACHED**

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**X AUTHORIZATION**

*I authorize the Icelandic Central Authority and the requested foreign Central Authority to act on my behalf or to designate another representative so to act as regards my request for the return of the child to Iceland*

Full name of the applicant	
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Place and date

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Signature of the applicant