Reference Number:	
	(For official use)



Non-refoulement Claim Form

[Note: Insofar as a non-refoulement claim includes a torture claim as defined by Part VIIC of the Immigration Ordinance, Cap.115 Laws of Hong Kong ("the Ordinance"), this form serves as the torture claim form specified by the Director of Immigration under section 37Y(4) of the Ordinance.]

Name of Claimant: _		
	(Family name/Surname Given name)	

Please read the guidelines for completion of this form at pages 2, 3, 4 and 5 before answering any question.

Guidelines for Completion of this Form

- 1. You have been served with a Notice entitled "Notice to Persons Making a Non-refoulement Claim" (hereafter referred to as "the Notice") which you should (or should have through the interpreter) read carefully before completing this form. You may refer to paragraphs 9 to 13 of the Notice for definitions and relevant provisions of grounds of non-refoulement protection to be considered by the Immigration Department ("ImmD").
- 2. This form must be completed fully in English or Chinese. It must be returned to the ImmD together with all documents supporting the claim that are readily available to you when this claim form is completed either by post or in person to the Removal Assessment Section ("RAS") at Unit 903B - 910A, 9/F, Skyline Tower, 39 Wang Kwong Road, Kowloon Bay, Kowloon within 28 days from the date when the ImmD issues a written request to you for return of the completed claim form. If you cannot meet the 28-day time limit, you must make an application for an extension of time in writing prior to expiry of this time limit and should provide full explanation why you cannot do so. Any request for extension will be considered on its own merits and may only be approved if it is satisfied that, by reason of special circumstances, it would be unjust not to extend the time limit. You should not assume that your application for extension of time will definitely be approved and hence an application for extension must be made as soon as possible once you are aware that there are special circumstances which may prevent you from returning the completed claim form in time. It is always your duty to ensure that the completed claim form is returned to RAS within the required time period and hence it is at your own risk that your non-refoulement claim will be deemed withdrawn on failure to return the completed claim form within 28 days from the date when the ImmD issues a written request to you or any further period that an immigration officer may have allowed pursuant to an extension application made by you if your current application for extension of time is subsequently not approved. If you are unable to return this form due to serious illness, you should produce the medical certificate for verification.
- 3. If there are substantial grounds for the ImmD to believe that there is a real, personal and substantial risk of your rights not to be subjected to (a) torture as defined under Part VIIC of the Ordinance, (b) violation of your absolute and non-derogable rights under section 8 of the Hong Kong Bill of Rights Ordinance, Cap.383 ("HKBORO") (such as the right to life under Article 2 and right not to be subjected to torture or cruel, inhuman or degrading treatment or punishment ("CIDTP") under Article 3), and/or persecution with reference to the non-refoulement principle under Article 33 of the 1951 Convention relating to the Status of Refugees ("the 1951 Refugee Convention") (collectively referred to as "all applicable grounds") being violated by the Risk State should you be sent there, it constitutes a ground for restraining the Hong Kong Special Administrative Region ("HKSAR") Government ("HKSARG") from proceeding to remove you to that state.
- 4. Notwithstanding paragraph 3 above, in completing this claim form, it is important for you to include all material facts and events relevant to your

non-refoulement claim, irrespective of whatever ground(s) you seek to rely on to seek protection. You may enlist the help of your legal representative in completing this form. The information provided will form the basis upon which your claim is investigated, upon which you will be required to attend an interview and upon which a decision whether to accept your claim as substantiated or reject your claim will be made. If necessary, please use additional sheets to provide any further information which you consider relevant to your claim and indicate the total number of additional sheets attached at question 73 below.

- 5. It is important that you answer <u>ALL</u> the questions in this form truthfully. You will be liable to the offence of making false statements, forgery of documents and use and possession of forged documents or of misleading any member of the Immigration Service by making a false statement or giving false information at this or <u>ANY</u> stage in the screening process. It may also adversely affect your credibility and prejudice your claim.
- 6. You must return this completed form together with all documents supporting your claim that are readily available. You should provide English or Chinese translation if any evidence or documents are in other languages and submit them without delay. If the documentary evidence or any other document(s) is not readily available and may only be submitted after returning this form, you must, upon return of the completed form, clearly indicate in writing your intent to submit further supporting document(s) at a later stage. Depending on individual circumstances, you will be given a reasonable opportunity to submit further supporting document(s) after returning this completed form.
- All information provided in this form will be used only for the purposes of 7. assessing your non-refoulement claim or in the investigation of other non-refoulement claims where a claimant is related to you or where the claim is in some way linked to you, and other directly related purposes. information may be disclosed to other HKSARG departments / bureaux, agencies, authorities, international organizations or other bodies where necessary for immigration and nationality purposes or to enable them to carry out their functions, or to secure entry facilities for repatriation. If a medical examination is to be conducted for the purpose of assessment of your non-refoulement claim, the information may also be disclosed to relevant persons, bodies or organizations in charge of the medical examination where necessary. As a general rule, neither the information indicating that you have made non-refoulement claim under the Unified Screening Mechanism ("USM") nor any information pertaining to your non-refoulement claim will be provided to the government of any country which you claim as Risk State(s) in respect of which you have made a non-refoulement claim (except in cases where you are a person whose surrender is requested in surrender proceedings where the HKSARG must fulfill legal obligations under the relevant fugitive offenders agreement(s)). In addition, nothing at all said by you in this form will be used against you in any subsequent criminal proceedings of any nature except an attempt to pervert the course of justice, or a charge of making false statements, forgery of documents and use and possession of forged documents for the purposes of or in connection with Part VIIC of the Ordinance or of misleading of any member of the Immigration Service by making a false statement or giving false information, or where ordered by the Court.

- 8. **Warning**: If you fail to return this completed form within the required time limit of 28 days from the date when the ImmD issues a written request to you or any further period allowed by the ImmD, your claim will be treated as withdrawn. Any subsequent request for re-opening your claim which is treated as withdrawn will not be allowed unless you can provide sufficient evidence in writing to satisfy an immigration officer that you had not been able to return this completed form as required due to circumstances beyond your control. For the avoidance of doubt, where a non-refoulement claim is treated as withdrawn, it is treated as withdrawn in its entirety on all applicable grounds.
- 9. The 1951 Refugee Convention or its 1967 Protocol has never been applied to Hong Kong; the HKSARG has a firm policy of not determining the refugee status of nor granting asylum to anyone. If your non-refoulement claim has been substantiated on grounds of, *inter alia*, persecution risk, your personal information may be passed to the United Nations High Commissioner for Refugees (UNHCR) for the purpose of considering if you should be recognised as a refugee under its mandate, and (if so) for seeking durable solution for you, including arrangement of resettlement in a third country. The UNHCR may further pass the information to overseas authorities for this purpose.
- 10. The provision of information in this form is voluntary. Nevertheless, it is your duty to provide all information relevant to the claim and make prompt and full disclosure of all material facts in support of the claim, including any document supporting those facts, irrespective of whatever ground(s) you seek to rely on to seek protection. You are therefore reminded that failure to provide sufficient details relating to your identity or the claim may jeopardize the assessment of your claim or your appeal / petition (if any). You should also be aware that any failure to answer questions of importance to your claim may damage your credibility and jeopardize the assessment of your non-refoulement claim. Furthermore, you may not be allowed to furnish additional facts after your claim has been determined, notwithstanding subsequent developments in relevant law, jurisprudence, or policy (except where such facts and events occur after you have completed this claim form which will be dealt with as a subsequent claim).
- 11. For those claimants who are minors or in other disabilities and have difficulties in completing this form on their own, this form may be completed by their parents, guardians or other adults who are responsible for their welfare on their behalf.

Points to note:

- You must duly complete and sign this form. Do not leave any questions unanswered. Insert 'none' or 'not applicable' where appropriate.
- You should give as much relevant details as possible and be truthful as regards the information you provide.
- You may submit the documents supporting the claim that are not readily

available at this stage after the return of this form. You must clearly indicate such intention in your answer to question 34 below.

Access to Personal Data:

- You have a right to request access to and correction of your personal data as provided for in sections 18 and 22 and Principle 6 in Schedule 1 of the Personal Data (Privacy) Ordinance (Chapter 486). Your right of access includes the right to obtain a copy of your personal data provided in this form subject to payment of a fee.
- Enquiries concerning the personal data collected by means of this form, including the making of request for access to and / or correction of the data, should be addressed to:

Chief Immigration Officer (Removal Assessment and Litigation) Support (1) Unit 903B - 910A, 9/F, Skyline Tower 39 Wang Kwong Road, Kowloon Bay Kowloon

Part 1 – Biographical Information

Personal Particulars

	Given names:
	Any other names:
	Gender: male [] female [] (tick as appropriate)
	Date of birth:/ (DD/MM/YYYY)
	Place of birth (Provide Town / Province / Country):
S	onal Details
	(a) Please state your last place of residence in your country of nationality
	(Provide full address - Street, Town, Province, Country). If you have more
	than one country of nationality, please state your last place of residence in each
	of them.
	(b) Please state your last place of residence in your country of habitual residence
	if your country of habitual residence is different from your country of nationality
	(Provide full address – Street, Town, Province, Country).

	(c) Please state the country / countries in respect of which you are making a
	non-refoulement claim (These country / countries will be collectively
	referred to as "Risk State(s)" in the ensuing questions)
	(d) If the Risk State(s) is not your country of nationality or habitual residence,
	please state your last place of residence in the Risk State(s) (Provide full
	address – Street, Town, Province, Country).
8.	How long did you live at your last place of residence in the Risk State(s) in
	Q.7(d)? Please also give dates.
9.	Did you live anywhere else in the Risk State(s)?
	Yes [] No [] (tick as appropriate)
	If Yes, please give addresses and dates:
10.	Citizenship / nationality at birth:
11.	Current citizenship / nationality/ country of habitual residence:
12.	Apart from your country(ies) of nationality or habitual residence, do you have
	any right of abode or right to land in, or right to return to, any other State in
	which you would be entitled to non-refoulement protection?
	Yes [] No [] (tick as appropriate)
	If Yes, please give details:

13.	Do you h	nave any docume	ents from you	r country(ie	s) or p	lace(s) of residence			
	which ve	erify your identit	y? Yes [] No []	(tick as appropriate)			
	If Yes, pl	lease give details	s:						
14.	What is y	your ethnic grou	p, tribe or rac	e?					
15.	What is y	your religion?							
16.	What is y	your first langua	ge?						
17.	What oth	ner languages car	n you speak o	or write?					
18.	Have you	u been convicted	l of any crime	outside the	HKSA	AR?			
	Yes []	No [] (tio	ck as appropr	iate)		\			
	If Yes, pl	lease provide de	tails of the cri	me committ	ted or	convicted:			
				X					
Edu	ication His	story							
19.	How mar	ny years of form	al education /	training hav	ve you	ı had? Year(s).			
(mc	From: onth / year)	To: (month / year)	Name and	address of scl	hool	Qualifications obtained			
(mc	onth year)	(month / year)				+			
						_			
						+			

Work History

20. How many years have you been employed / self-employed? _____ Year(s).

From:	То:	Name and address	Type of Work
(month / year)	(month / year)	of company or employer	

21. If you were not employed, did you receive any benefits or allowances or other payments in the Risk State(s) or your country(ies) of nationality / habitual residence in case they are not the same?

Yes [] No [] (tick as appropriate) (If Yes, please give details)

From:	То:	Where did you	Type of benefits or	Amount per
(month /	(month /	receive benefits or	allowances or other	month
year)	year)	allowances or other	payment	
		payments?		
		>>/		

Family Details

22.	Present marital status:	(Please tick appropriate box)	
	Single []	Married []	Separated []
	Divorced []	Widowed []	
	Other, please specify []	(e.g. cohabitation,
	polygamous marriage, et	c.)	

23.	Full name of your previous spouse(s), if any:
24.	Full name of your present spouse or partner(s):
25.	His / Her date of birth:/ (DD/MM/YYYY)
26.	His / Her nationality(ies):
27.	His / Her ethnic group, tribe or race:
28.	His / Her religion:
29.	His / Her present address (Provide full address - Street, Town, Province, Country):

30. Please list out details of <u>all</u> your dependant child(ren), if any, from current or previous relationships and details of any other dependant(s) or step child(ren) – (Please write "None" if no dependant children, step children or any other dependant.)

				*		
Name	Gender	Date & Place	Current	Ethnic	Religion	Name of other parent (Please
		of birth	whereabouts	group,		state if deceased and when)
				tribe or		
				race		

31. Please state particulars of your parents.

	Father	Mother
Family name		
Given name		
Any other names		
Date of birth		
Nationality / Citizenship		
Religion		
Living or deceased		
Your dependant?		
(Yes or No)		
Present address		
(if living)		

32. Please state particulars of your brothers and sisters (including step brothers or sisters).

Family	Given	Gender	Date of	Current	Ethnic group,	Parent's name (if
name	Name		birth	whereabouts	tribe or race	different from you)
						(Please state if
						deceased and when)

33.	Please state particulars of any other dependants of yours. (If you have any other				
	dependants who are not named above, please give details in full. Please	ise use			
	additional sheets as necessary.)				



Part 2 – Documentation

34.	Do you have any documents to submit in support of your claim?				
	Yes [] No [] Yes, but not readily available [] (tick as appropriate) If Yes, please list the documents which you are submitting below. (Please use additional sheets as necessary.)				
	If the document(s) is/are not readily available, please specify (a) nature of the				
	document(s) you intend to submit in support of your claim, (b) the relevancy to your non-refoulement claims, (c) when you can submit the documents and (d) why they are not readily available.				

Part 3 – Basis of Your Claim

Points to note:

- Notwithstanding paragraphs 9 to 13 of the Notice on what constitutes an applicable ground for non-refoulement protection, you shall include all material facts and events relevant to your non-refoulement claim, irrespective of whatever ground(s) you seek to rely on to seek non-refoulement protection.
- When answering the questions below, you should tell us everything which you consider relevant to your claim and which you would wish the Director to take into account when making a decision on your claim.
- You should give full details (date, time, location, etc.) of all events to which you have referred below.
- You should also provide full details in relation to any problems encountered by others which you consider are relevant to your claim and have referred to below.
- ➤ If you need more space to write on, please use additional sheets and provide the number of additional sheets at Question 73 below.

35.	When and why did you leave the Risk State(s)?					
36.	What do you fear may happen to you if you return to the Risk State(s)? Please					
	give as much detail as possible.					

37.	Are you afraid of being subjected to torture, CIDTP, persecution, deprivation of					
	life, and / or any kind of irreparable harm if you return to the Risk State(s)?					
	Yes [] No [] (tick as appropriate)					
	If Yes, explain why you are afraid and describe the nature of harm you fear, by					
	whom it / they may be inflicted on you, and why it / they might be inflicted on					
	you.					
	you.					
38.	Have you, your family, or close friends or colleagues ever been subjected to					
	torture, CIDTP, persecution, deprivation of life, and / or any kind of irreparable					
	harm in the Risk State(s) in the past by anyone?					
	Yes [] No [] (tick as appropriate)					
	If Yes, please explain in detail: (a) What happened; and (b) When and by whom					
	was the harm inflicted.					
20						
39.	In regard to the risk(s) stated above, did you seek assistance from, or report your					
	fears to, any authorities in the Risk State(s) or elsewhere?					
	Yes [] No [] (tick as appropriate) If No, please go to Q.41					
	If Yes, when and to whom did you report it?					
40.	What action did the authorities take?					
10.	what action did the authorities take.					

If you did not seek assistance or report your fears to any authorities in the Risk					
State(s) or elsewhere, why not?					
Have you ever moved to a different town or village or to another part of the					
Risk State(s) to avoid any of the harms you fear that you stated above?					
Yes [] No [] (tick as appropriate)					
If Yes, please provide details including where and when you moved and how					
long you stayed there:					
If No, please explain why not:					
Do you think the authorities in the Risk State(s) can and will protect you if you return? Why or why not?					
Have you ever been accused, charged, interrogated, arrested, detained,					
imprisoned or harmed in any manner whatsoever in the Risk State(s) (otherwise					
that what is stated above)?					
Yes [] No [] (tick as appropriate)					
If Yes, please state (a) by whom, (b) for what reason, (c) when, (d) where, (e)					
for how long you were detained, and (f) what brought your detention to an end:					

45.	Have any members of your family, or close friends or colleagues ever beer
	accused, charged, interrogated, arrested, detained, imprisoned, killed, or harmed
	in any manner whatsoever (otherwise that what is stated above) in the Risk
	State(s)?
	Yes [] No [] (tick as appropriate)
	If Yes, please state (a) by whom, (b) for what reason, (c) when, (d) where, (e)
	for how long were they detained, and (f) what brought their detention to an end:
46.	Were any persons (such as a lawyer, relatives or friends) permitted to see you
	during detention? If so, how long after the arrest were you visited? Give details
	of the visits (the dates, the duration and the names of the visitors):
47.	Have you approached any international organisation (such as the UNHCR) for
	assistance?
	Yes [] No [] (tick as appropriate)
	If Yes, when and whom did you approach:
48.	Have you made any refugee application in or outside the HKSAR before?
	Yes [] No [] (tick as appropriate)
	If Yes, please state:
	(i) the date(s) of your application:
	(ii) the place(s) where you lodged the application:
	(iii) the outcome of your application(s):
	(Note: You have to attach copies of all documents issued with regard to those
	refugee claims. If your refugee application is still under processing, you must

inform this office of the outcome of your application once available.)

	consent for the UNHCR to release your information to the HKSARG?
	Yes [] No [] (tick as appropriate)
	(Note: If Yes, please sign the form at Annex 1.)
	If No, why not?
50.	Have you or your family members ever belonged to or been associated with any
	organisations or groups in the Risk State(s) (such as, but not limited to, a
	political party, student group, labour union, religious organisation, military or
	paramilitary group, civil patrol, guerrilla organisation, ethnic group, human
	rights group, or the press or media) which is relevant to your claim?
	Yes [] No [] (tick as appropriate)
	If Yes, please describe for each person the level of participation, any leadership
	or other positions held, and the length of time you or your family members were
	involved in each organisation or activity if it is relevant to your claim. (Please
	use additional sheets as necessary.)
51.	Do you or your family members continue to participate in any way in these
	organisations or groups?
	Yes [] No [] (tick as appropriate)
	If Yes, please describe for each person the current level of participation, any
	leadership or other positions currently held, and the length of time you or your
	family members have been involved in each organisation or group. (Please use
	additional sheets as necessary.)

49. If you have made a refugee application in the HKSAR, are you willing to give

52.	Is there any	other reason(s) why you	cannot be returned	to the Risk State	(s)	12
·	is there the	ouiter reason(s	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	earling of locality	to the Itibit State	(5)	•

Yes []	No []	(tick as appropriate)		
If Yes,	ple	ase ela	borat	e.		



Part 4 – Travel Details

53.	Have you travelled outside the Risk State(s) on any occasion prior to coming to the HKSAR?							
] (tick as appropria	te)					
	purposes of the jour	purposes of the journey(s)						
	means by which yo	u left (air, train, sea -	– please provide detail	(s)				
	and date you return	ed to the Risk State(s)					
54.	Have you ever beer	issued with a passp	ort or other travel doc	ument?				
	Yes [] No [] (tick as appropriate)							
	If Yes, please comp	lete the following:		,				
	Which country((ies) Date of iss	sue Place of issue	Where is it now?				
	issue to you the pa	-						
	or travel docum	ent'?						
55.	Have you ever beer	n issued a visa to ente	er any country?					
	Yes [] No [] (tick as appropriate)							
	If Yes, please complete the following:							
	Country	Type of visa	Date of issue	Place of issue				
				_				

	Yes [] No [] (tick as appropriate) If Yes, when and where did you apply?
' .	Were you issued with a visa for your trip to the HKSAR?
	Yes [] No [] (tick as appropriate)
	If Yes, please provide full details - type of visa, when and where issued, expir-
	date:
•	If you had no visa, what documents did you use to enter the HKSAR?
•	The date you last left the Risk State(s):/(DD/MM/YYYY)
	What travel arrangements did you make for this journey and how did you mak
	them? Did you have to pay anyone and, if yes, to whom and how much did you pay?
•	Mode(s) of transport:
,	
•	During your last journey to the HKSAR, which countries or places did you
	travel through?

For each country or place you travelled through please provide the following details:

Country / Place	When were you there (dates)?	How long did you remain there?

If you ar	e not traveling with your family members, why did they not travel
you?	
Where an	re your family members now?
Are you	still in contact with your family members?
Yes []	No [] (tick as appropriate)
If Yes, pl	ease provide their contacting details.

67. Have you ever lived in a country other than the Risk State(s)?

Yes [] No [] (tick as appropriate)

If Yes, please complete the following table for each country you have lived in:

Country	When did you reside there (length of residence and dates)?	Address at which you resided?



Part 5 – Completion of this Claim Form

68.	Did you complete this form by yourself?		
	Yes [] No [] (tick as appropriate)		
	If No, who completed or assisted you to complete this form?		
	Name:		
	Means of contact (e.g. address or telephone number):		
	Relationship to you:		
	Please state why you were unable to complete it or required assistance to complete it:		
69.	Are you legally represented in making your claim? Yes [] No [] (tick as appropriate)		
	If Yes, please state the name and address of your legal representative:		
70.	Please indicate whether you prefer the interview(s) to be audio recorded:		
	Yes [] No [] (tick as appropriate)		
71.	Do you require an interpreter when attending interview(s)?		
	Yes [] No [] (tick as appropriate)		
	If Yes, please specify the language / dialect.		
72.	Do you have any special needs in relation to investigation / assessment of your		
	claim (e.g. a signer or an interpreter of preferred gender, etc.)?		
	Yes [] No [] (tick as appropriate)		
	If Yes, please state your needs with reasons.		
73.	Please state the total number of additional sheets attached to this form?		
	sheets		

74. Please provide a telephone number where you can be contacted during the day. (Note: Please notify this office in writing of any change of your telephone number as soon as practicable to facilitate our communications with you.)

75. Please provide your residential and correspondence address (if different from the residential address) in Hong Kong. (Note: You must notify this office in writing of any change in either of these addresses as soon as practicable after the change)

Residential Address: ______

Correspondence Address:

Part 6 – Interpreter's Confirmation

I, (print full name clearly), her	eby confirm
that I have accurately interpreted the entire content of this form and all of	the attached
documents to the claimant from the English / Chinese langu	age to the
language (state dialect if applicable). I am	proficient in
both languages and am able to communicate fully with the claimant. T	he claimant
has indicated that he / she fully understands the entire content of th	is form and
Interpreter's signature Date	ne.
Interpreter's signature	

Part 7 – Your Confirmation as a Claimant

Before you sign, please check that you have answered all the questions fully and accurately giving as much detail as possible. All the information you have provided in this form will be considered in making a decision on your claim.

If you **DID NOT** require the assistance of an interpreter, you should complete **CONFIRMATION A**.

If you **DID** require the assistance of an interpreter, you should complete **CONFIRMATION B**.

Confirmation A

I confirm that the information provided in this form and all of the attached documents is complete, true and correct. I confirm that I have set out all of the facts and grounds for seeking non-refoulement protection in Hong Kong, irrespective of whatever ground(s) I seek to rely on to seek such protection. I confirm that I am able to read English / Chinese and that I fully understand the entire content of this form and all attached documents. I understand that I shall be guilty of an offence if I make or cause to be made any statement or representation which I know to be false or do not believe to be true, or use any forged, false or unlawfully obtained or altered document, or have in my possession any forged, false or unlawfully altered document whatsoever intended for use for the purpose of my torture claim (if applicable). I also understand that I shall be guilty of an offence if I mislead any member of the Immigration Service by making a false statement or giving false information or use a false instrument.

Your signature	Date

Confirmation B

I confirm that the entire content of this form and all of the attached documents have been interpreted to me. I confirm that I have set out all of the facts and grounds for seeking non-refoulement protection in Hong Kong, irrespective of whatever ground(s) I seek to rely on to seek such protection. I confirm that the information I have provided in this form and all attached documents is complete, true and correct. I understand that I shall be guilty of an offence if I make or cause to be made any statement or representation which I know to be false or do not believe to be true, or use any forged, false or unlawfully obtained or altered document, or have in my possession any forged, false or unlawfully altered document whatsoever intended for use for the purpose of my torture claim (if applicable). I also understand that I shall be guilty of an offence if I mislead any member of the Immigration Service by making a false statement or giving false information or use a false instrument.

