

# **Application Form** for Organisations

# Request for Participation in Proceedings and Reparations at the ICC For Victims that are Organisations or Institutions

#### PART A

#### INFORMATION ABOUT THE ORGANISATION OR INSTITUTION

1.	Has the organisation or institution already submitted an application for participation or for reparations to the ICC?
	□ Yes □ No
2.	If yes and the organisation or institution has a registration number, please indicate it here:
3.	Name(s) of the organisation or institution:
4.	Current Address of the organisation or institution:
	Village/City/Town:
	County/District/Province:
	Country:
5.	Date and place of incorporation, establishment and/or registration, if applicable, of the organisation or institution:
	Date of incorporation, establishment and/or registration:
	Place of incorporation, establishment and/or registration:

6.	6. What was the legal status of the organisation or institution on the date that the event(s) occured						
	Please provide proof of the incorporation, establishment and/or registration of the organisation or institution, if applicable, at the date the event(s) occur red (such as certificate of incorporation or registration).						
	☐ Non-governmental charitable or non-profit organisation (organisation established to voluntary services including religious, artistic, scientific, social or charitable services community or any part of it)						
		Statutory body (such as a governmental or	rganisation, public school, public hospital, etc)				
	☐ Corporation or company (such as educational company, media or communications company private hospital or clinic, etc)						
	community (such as a cooperative society, building						
		Partnership					
		Other - please specify:					
7.	. Name(s) of the person submitting the application on behalf of the organisation or institution:  Please give all names, as completely as possible						
8.	Nationality of the person submitting the application:						
9. How can the person submitting the application be contacted?  Please complete all that apply							
	Tele	phone Number(s):					
	Stre	et:	Number/Plot:				
	P.O	. Box:	Sector/Cell/Zone:				
	Vill	age/City/Town/Camp:					
	Sub	-county/Parish:					
	Cou	unty/District/Province:					
	Pos	tal Code:	Country:				
	Ema	ail:					
10.	Occ	cupation and job title of the person submit	ting the application:				

11	What proof of identity is the person submitting the application providing?			
11.	Please specify	11. It is a requirement that the person submitting the application provide proof of identity. This can include,		
12.	In what capacity is the person acting for the organisation or insitution? <i>Please provide proof of this capacity</i>	for example, national identity card, birth certificate, voting card, passport, driver's licence, student or employee card,		
	Authorised representative of the organisation or institution (such as company director, president)	letter from a local authority, camp registration card, card from a humanitarian		
	☐ Legal representative	agency, tax document or other document identifying		
	Other - please specify:	the victim.		
13.	What language(s) does the person submitting the application speak?			
14.	Is someone assisting the person submitting the application to fill in this form?			
	□ Yes □ No			
15.	If yes, what is that person's name and organisation (if any)?			
	(name) (organisation)			
16.	Is an interpreter assisting with the filling in of this form?			
	□ Yes □ No			
PA	ART B	_		
	FORMATION ABOUT THE ALLEGED CRIME(S)			
111	FORMATION ABOUT THE ALLEGED CRIME(5)			
17.	What happened to the organisation or institution? Describe the event(s) in as much detail as possible.			
	If more space is needed, please attach answers to this question on a separate sheet of paper			

18. When did these event(s) occur?  If possible, please specify day(s), month(s) and year(s) or where the exact dates are not known please provide any information that will enable us to identify the dates  19. Where did these event(s) take place?  If necessary, attach a drawing or a map of the location  19. Please be as possible, possible, did in the neare  20. Who does the organisation or institution believe is responsible for the event(s)? )? If possible, explain why the organisation or institution believes this.	
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	est town/city

## PART C

#### INFORMATION ABOUT THE INJURY, HARM OR LOSS SUFFERED

21. The property that was harmed was dedicated to:  Please tick one or more boxes as appropriate	
☐ Religion ☐ Education ☐ Art ☐ Science ☐ Charitable purposes ☐ Historical monument ☐ Hospital ☐ Humanitarian purposes ☐ Other - please specify:	
22. What direct harm to the property resulted from the event(s)?  If more space is needed, please attach answers to this question on a separate sheet of paper	22. This may include, for example, damage to land, buildings, movable property (eg materials of equipment), monument or cemeteries, or environmental resource (eg water sources).
PART D	
PARTICIPATION IN THE PROCEEDINGS	
<ul><li>23. Does the organisation or institution want to present its views and concerns in ICC proceedings?</li><li>☐ Yes ☐ No</li></ul>	23. Usually the organisatic or institution would prese its views and concerns through a lawyer who
24. If yes, why does the organisation or institution want to participate in the proceeding	s? In a small number of cases there may be an opportunity for victims (including organisations o institutions) to be involved in person, but this is not a requirement.

# PART E

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26.	Would the organisation or institution like to apply for reparations?  i.e. Does the organisation or institution want something to be done for what it suffered?  Yes No  If yes, what would the organisation or institution want?  Who does the organisation or institution want the benefit to go to?	25/26. What is the organisation or institution expecting if the accused person is found guilty? Reparations can be anything which can help the organisation or institution to repair the harm suffered. This can include compensation, various forms of assistance receiving back lost land or property, and/or symbolic or moral measures such as apologies and monuments. Please list any measures which the organisation or institution would like.
	Tick more than one box, if necessary	
	<ul><li>☐ The organisation or institution</li><li>☐ Other (please specify)</li></ul>	
PA	ART F	
LE	GAL REPRESENTATION	
28.	Does the organisation or institution have a lawyer?	28. In order to represent
	□ Yes □ No	victims before the ICC, a lawyer must be on the
29.	If no, would the organisation or institution like assistance from the ICC to find a lawyer?	ICC list of counsel. Lawyers not on the list may apply for inclusion.
	□ Yes □ No	
30.	Until the organisation or institution has a lawyer, would it like to be represented by the Court's lawyers for victims (the Office of Public Counsel for Victims)?	30. The OPCV is an independent office within
	□ Yes □ No	the Court which looks after the legal interests of
31.	If the organisation or institution has a lawyer, please provide the lawyer's contact details	victims and which represents victims free of charge.
	Name:	
	Address:	
	Email: Telephone number(s):	

### PART G

#### **COMMUNICATION OF IDENTITY**

Please note that the present application will be given to the defence (the accused person and his/her lawyers) and to the ICC Prosecutor. When this happens, the Judges may decide not to reveal the identity of the organisation or institution and of the person submitting the application.

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32. Would the person submitting the application have any reason to be concerned a her security, well-being, dignity or privacy or that of any other person if his or hor that of the organisation or institution, were to be revealed to the defence or the	ner identity,
□ Yes □ No	32. The person submittin
If yes, what are the reasons?	about harm to his or her
	psychological well-bein reputation, privacy and/or dignity or those of his or her family.
PART H	The identity of the organisation/institution
SIGNATURES	or the person submitting the application will not revealed to the public while the application is
SIGNATURE OF THE PERSON SUBMITTING THIS APPLICATION	being considered. If the application is accepted, the organisation or institution may be asked
I hereby declare that:	again about disclosure of information.
• To the best of my knowledge and belief, the information I have given in Application Form is correct	
Signature, thumbprint or other mark of the person submitting the  Date: Location: (day) (month) (year)	
REMINDER:	NOTE:
THE FOLLOWING DOCUMENTS SHOULD BE ATTACHED TO THIS APPLICATION FORM For the organisation or institution:	This Application Form and the process of applying are free of charge.
Photocopy of proof of the incorporation, establishment and/or registration of the organisation or institution (REQUIRED)	The ICC does not charge any fee at any stage of the application process.
For the person submitting the application:	
Photocopy of proof of identity (REQUIRED)  Photocopy of proof of capacity to represent the organisation or institution (REQUIRED)	