

DECLARATION: APPOINTMENT OF A TRUSTED PERSON

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Case number CGRS:

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P.S. number:

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**The asylum seeker:**

Name, first name: .....

Nationality: .....

Place and date of birth: .....

Chosen residence: .....

Telephone number: .....

Fax number: .....

E-mail address: .....

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Appoints as a confidant:

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**Mr or Ms:**

Name, first name: .....

Nationality: .....

Place and date of birth: .....

Occupation + employer: .....

Professional link with asylum seeker: .....

Working address: .....

Phone number and/or e-mail address: .....

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who accepts this appointment.

Hereby the asylum seeker authorizes the confidant to assist him/her during the processing of the asylum application by the CGRS.

A copy of a Belgian identity document or of a residence document (Belgian or issued by a European Member State) has been attached to this document.

