



DECLARATION: RENUNCIATION OF THE APPLICATION FOR INTERNATIONAL PROTECTION

CGRS dossier number:

P.S. number:

Please send this form duly completed, dated and signed to the CGRS:

By post Office of the Commissioner General for Refugees and Stateless Persons
Helpdesk lawyers, trusted persons and UNHCR
Boulevard du Roi Albert II, n° 26A
1000 Brussels

By fax 02 205 50 33

By e-mail CGRA-CGVS.Advocate@ibz.fgov.be

Or hand in this form duly completed, dated and signed at the Reception Desk of the CGRS.

I the undersigned:

Surname and first name:

Nationality:

Place and date of birth:

Declare hereby that I renounce of my own free will my application for international protection in Belgium and that I am fully aware of the fact that this renunciation puts an end to the examination of my application for international protection.

Place and date:

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Signature:

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