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| **Travel Ban Exemption Request Form** | | | | | | |
| * This form is intended to assist Member States in making requests for exemptions to the travel ban imposed under the ISIL (Da’esh) and Al‑Qaida sanctions regime. * For a **new request**, please fill out **Sections 1, 2, 3, 4 and 5**. * For **any subsequent change**, please fill out **Sections 1 and 6**. * For a **request for an extension of the approved travel**, please fill out **Sections 1 and 7.** * A travel by a listed individual may also require an exemption to the assets freeze. To make a request for an exemption to the assets freeze, please consult [here](https://www.un.org/sc/suborg/en/sanctions/1267/travel-ban/assetsfreeze). * The completed form should be emailed from an official email address of your Permanent Mission to the United Nations in New York to the Chair, through the Secretariat of the Committee ([SC-1267-Committee@un.org](mailto:SC-1267-Committee@un.org)) with a copy to the Analytical Support and Sanctions Monitoring Team ([1267mt@un.org](mailto:1267mt@un.org)). Incomplete requests will result in a delay in consideration by the Committee. * Should your Government have any questions or need any assistance regarding requests for exemptions from the travel ban, please contact the Monitoring Team ([1267mt@un.org](mailto:1267mt@un.org)) and the Secretariat ([SC-1267-Committee@un.org](mailto:SC-1267-Committee@un.org)). * All requests for exemptions and extensions thereto which have been approved by the Committee will be posted on the Committee’s [website](https://www.un.org/sc/suborg/en/sanctions/1267/travel-ban/travel-exemptions-in-effect) until receipt of written confirmation of the completion of the travel. | | | | | | |
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|  | **Special note on the scope of the ISIL (Da’esh) and Al Qaida travel ban**   * Under the ISIL (Da’esh) and Al Qaida sanctions regime, there is no obligation for a State to deny entry into or require the departure from its territories of its own nationals. * Travel ban does not apply where entry or transit of the listed individual is necessary for fulfilment of a judicial process. | | | | |  |
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| **1. Information about the requesting State** | | | | | | |
| a) Date of submission: | | | Click or tap to enter a date. | | | |
| b) Your Government is the: | | | State of **Nationality**  State of **Residence**  State of **Destination**  State of **Transit** | | | |
| c) Please provide a contact person in the Permanent Mission in New York. | | | | | | |
| Name: | | | Click or tap here to enter text. | | | |
| Phone number: | | | Click or tap here to enter text. | | | |
| Email address: | | | Click or tap here to enter text. | | | |
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| **2. Information about the State of Destination** | | | | | | |
| a) Has your Government secured the agreement of the State of destination for the travel? | | | | **YES**   **NO** | | |
| \* The Committee shall consider requests for exemptions to the travel ban in consultation with States of transit and destination and any other relevant States, and **will only agree to exemptions to the travel ban with the agreement of the States of transit and destination.** | | | | | | |
| b) If **Yes** to **a)**, please provide the contact person in the State of destination: | | | | | | |
| Country name: | | | Click or tap here to enter text. | | | |
| Name: | | | Click or tap here to enter text. | | | |
| Phone number: | | | Click or tap here to enter text. | | | |
| Email address: | | | Click or tap here to enter text. | | | |
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| **3. Information about the State of Transit *(if any)*** | | | | | | |
| a) Has your Government secured the agreement of the State of transit for the travel? | | | | **YES**   **NO** | | |
| b) If **Yes** to **a)**, please provide the contact person in the State of transit: | | | | | | |
| Country name: | | | Click or tap here to enter text. | | | |
| Name: | | | Click or tap here to enter text. | | | |
| Phone number: | | | Click or tap here to enter text. | | | |
| Email address: | | | Click or tap here to enter text. | | | |
| \* If there are multiple States of transit, please provide the same information below. | | | | | | |
| Click or tap here to enter text. | | | | | | |
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| **4. Information about the traveller** | | | | | | |
| a) Permanent reference number: | | Click or tap here to enter text. | | | | |
| \* Permanent Reference Number can be found at [www.un.org/sc/suborg/en/sanctions/1267/aq\_sanctions\_list](http://www.un.org/sc/suborg/en/sanctions/1267/aq_sanctions_list) | | | | | | |
| b) Full name: | | Click or tap here to enter text. | | | | |
| c) Nationality: | | Click or tap here to enter text. | | | | |
| d) Passport number:  (or other travel document number) | | Click or tap here to enter text. | | | | |
| e) Current address: | | Click or tap here to enter text. | | | | |
| f) Has the traveller expressed his/her intention to return to the current address? | | **YES**   **NO** | | | | |
| *i) If* ***NO*** *to* ***f)*** *above, where is the traveller’s final destination? (full address)* | | Click or tap here to enter text. | | | | |
| \* **Written confirmation** of the completion of the travel by the listed individual shall be provided to the Chair within **five working days following the expiry of the exemption** by the State in which the listed individual has stated he or she will be resident after completion of the exempted travel. | | | | | | |
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| **5. Information about the travel** | | | | | | |
| a) Purpose of the travel:  (including specific details of meetings) | | Click or tap here to enter text. | | | | |
| b) Justification for the travel: | | Click or tap here to enter text. | | | | |
| \* For a) and b), please attach copies of **supporting documents** on the purpose and justification. | | | | | | |
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| c) Date and time of departure: | | Click or tap here to enter text. | | | | |
| *i) If the request is submitted* ***less than 15 working days before the departure***  **Reason for Late Submission**: | | Click or tap here to enter text. | | | | |
| \* Each request for exemption shall be received as early as possible but not less than **fifteen working days before the date of the proposed travel**, except where humanitarian considerations require a shorter period. | | | | | | |
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| d) Date and time of return: | | Click or tap here to enter text. | | | | |
| e) Complete itinerary & timetable:  (including all **transit** stops) | | Click or tap here to enter text. | | | | |
| f) Details of the mode of transport:  (including where applicable, record locator, flight numbers and names of vessels) | | Click or tap here to enter text. | | | | |
| g) Making a separate request for exemption to the assets freeze to fund the travel? | | | | | **YES**  **NO** | |
| h) All uses of funds or other financial assets or economic resources in connection with the travel: | | Click or tap here to enter text. | | | | |
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| **6. Changes to a previously-submitted request** | | | | | | |
| \* Any changes to the request shall be communicated immediately to the Chair. | | | | | | |
| a) Date of initial request: | | Click or tap here to enter text. | | | | |
| b) Was the request approved? | | **YES**   **NO** | | | | |
| c) What are the changes? | | **Departure time** only (less than 48 hrs)  Other  **Departure time** change more than 48 hrs | | | | |
| *i) If the change is the departure time only (less than 48 hrs)*  **New Departure Date & Time**: | | Click or tap here to enter text. | | | | |
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| *ii) If the departure is advanced/ postponed more than 48 hrs* | | **New Exemption Request** should be submitted | | | | |
| *iii) For other changes* | |  | | | | |
| \* Such changes require further consideration by the Committee and shall be received by the Chair no less than **three working days prior to the commencement of the travel**. | | | | | | |
| **Reasons for the changes:** | | Click or tap here to enter text. | | | | |
| **Details of the changes:** | | Click or tap here to enter text. | | | | |
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| **7. Extension of the approved exemption to the travel ban** | | | | | | |
| \* Any request for an extension of the exemption shall be subject to the procedures set out above and shall be received by the Chair in writing, with a revised itinerary, no less than **five working days before the expiry of the approved exemption**. | | | | | | |
| a) Date of initial request: | | Click or tap here to enter text. | | | | |
| b) Reasons for an extension: | | Click or tap here to enter text. | | | | |
| c) **Revised** itinerary & timetable:  (including all **transit** stops) | | Click or tap here to enter text. | | | | |
| d) Details of the mode of transport:  (including where applicable, record locator, flight numbers and names of vessels) | | Click or tap here to enter text. | | | | |
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