



AFRICANDEFENDERS

Pan-African Human Rights Defenders Network

Intake form

Date; _____

PERSONAL INFORMATION.

1. Full Name of the individual/organisation (as it appears on official documents. Please attach a copy of your passport biodata page / national identification document/ refugee identification documents);

2. Present Address (including City and Country); _____

3. Place and country of birth;

4. Human Rights Organization worked with (Name and Address) and position held;

5. Email Address; _____

6. Telephone Number; _____

7. Date of Birth; _____

8. Gender: _____

We request disclosure of gender from our HRDs to ensure the provision of personalized support that is crafted to address individual needs, taking into consideration the unique aspects associated with gender. (Woman, Man, Transman, Transwoman, Non-

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- Completing the form doesn't guarantee support by the organization.
- Confidentiality of the information provided will be respected and adhered to during and after this process.



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binary, _ Nonconforming)

9. Marital Status; _____

10. Number of Children/dependants/staff by gender

- Male: _____
- Female: _____
- Transman: _____
- Transwoman: _____
- Non-binary: _____
- Non-conforming _____

11. Current Nationality; _____

12. Passport Number; _____

(Please attach a copy of the passport)

13. Languages spoken; _____

14. Profession; _____

15. Have you contacted and received assistance from any other organization? (If yes; please state the name and type of assistance received)

16. Any special needs (sickness monitoring, counseling, etc);

17. Person to contact in case of emergencies;

(Name, email and telephone contact) _____

18. Referred by (Organization or individual); _____

19. SPOUSE / PARTNER.

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First Name; _____

Middle Name; _____

Last Name; _____

Date of Birth; _____

Nationality; _____

Gender; _____
(Woman, Man, Transgender, Non-binary)

Current residence of spouse; _____

Telephone contact; _____

Email address; _____

20. IF YOU HAVE LEFT YOUR COUNTRY;

Date of departure from Country of origin; _____

Place of Origin; _____

Place of Arrival; _____

Date of Arrival; _____

Point of Entry; _____

Countries transited through; _____

Duration in Transit; _____

Current Immigration Status; _____

FURTHER INFORMATION;

21. Details of human rights activities involved in including organizations and dates worked for and the duration (Kindly add online links where possible for verification purposes)

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22. Details of the threats/incidents received and from whom including dates (Kindly add online links or any other evidence where possible for verification purposes)

Date of threat/incident	From whom the threat /incident is	Details of threat (e.g. violations of rights, sexual- and gender-based violence, arrests, online harassments etc)

23. Do you require any assistance, if so what kind? Please state whether it includes support to the applicant, their family or organization (Please include a tentative detailed budget for emergency support)

Types of assistance needed	Please provide explanations
Emergency protection (Please add a detailed budget below this table)	
Trainings/capacity building	
Any other support needed	

24. Contact information of two references.

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(Persons who can be contacted to verify the information provided in this form including human rights work and the threats;(Please include references from national and international organisations you have worked with)

REFERENCE ONE

Name	
Organization	
Address	
Telephone	
Email	

REFERENCE TWO

Name	
Organization	
Address	
Telephone	
Email	

25. Is there any other information that you would like us to know?

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