



## Application to submit voluminous disclosure to the Refugee Protection Division

Use this form to submit evidence (disclosure) on country conditions that exceeds one hundred (100) pages per country for a proceeding at the Refugee Protection Division (RPD).

## Important information

- Country conditions evidence in excess of one hundred (100) pages is called voluminous disclosure. If
  you wish to submit voluminous disclosure, you must complete and submit this form with your evidence.
  This form is not needed to submit personal documents over 100 pages, such as identity documents,
  police reports, etc.
- Submit this form as soon as possible. Do not wait until the day of the hearing. Evidence submitted within ten (10) calendar days of the hearing is called late disclosure. If you are submitting late disclosure, you must also complete and submit an Application to Submit Late Disclosure along with this application.
- · Your documents must be:
  - In either French or English or accompanied by a translation into English or French
  - Paginated (each page is numbered in consecutive order)
  - In printed form, not a hyperlink (e.g., a link to a website or document online). Hyperlinks may be included in document text, but the content found at the links will not be considered as evidence.
  - Attach a list that identifies each document (for example, by author, date, and subject)
- The IRB's National Documentation Packages (NDPs) contain public documents that provide information on country conditions: <a href="https://irb.gc.ca/en/country-information/ndp/Pages/index.aspx">https://irb.gc.ca/en/country-information/ndp/Pages/index.aspx</a>. You should consult the NDPs for your country or countries. Do not duplicate information in an NDP because the member is already aware of it.
- When deciding whether to accept voluminous disclosure, the RPD considers if the evidence is relevant and probative, and whether the evidence is already provided in other documents, such as in the NDPs.
- The RPD will let you or your counsel (if applicable) know if your application is allowed or refused. If your application is refused, you will not be able to use the voluminous disclosure in your hearing. You must still come to the hearing and be ready to proceed. If you do not receive a response from the RPD before the date scheduled for your proceeding (for example, if you sent your request close to the scheduled date), you must appear and the member will grant or refuse your application at the start of your proceeding. If the member refuses your application, you will not be able to use the voluminous disclosure in your hearing.

| Tell us who this request is for   |                         |  |  |  |  |  |
|---|-------------------------|--|--|--|--|--|
| Who is making this application? Claimant / protect  | red person Minister     |  |  |  |  |  |
| Provide the first and last names of all claimants making this application and their RPD or UCI file numbers. If your group has more than five (5) individuals, please attach an additional page with the remaining names and RPD or UCI file numbers. |                         |  |  |  |  |  |
| Name:   | RPD or UCI file number: |  |  |  |  |  |
| Name:   | RPD or UCI file number: |  |  |  |  |  |





| Name:   | RPD or UCI file number: |  |  |  |  |  |
|---|-------------------------|--|--|--|--|--|
| Name:   | RPD or UCI file number: |  |  |  |  |  |
| Name:   | RPD or UCI file number: |  |  |  |  |  |
| Contact the RPD Registry if you do not have the RPD or UCI file numbers. To find the RPD Registry telephone number for your region, consult <a href="https://irb.gc.ca/en/contact/Pages/contact3.aspx">https://irb.gc.ca/en/contact/Pages/contact3.aspx</a> .   |                         |  |  |  |  |  |
| Name of counsel:  |                         |  |  |  |  |  |
| I have no one to represent me (lawyer, consultant, other)   |                         |  |  |  |  |  |
| Date of scheduled proceeding (yyyy-mm-dd):  |                         |  |  |  |  |  |
|   |                         |  |  |  |  |  |
| Provide your reasons for making this request  |                         |  |  |  |  |  |
| Use the sections below to provide the reasons why your of including what parts of the documents are relevant for your cl  |                         |  |  |  |  |  |
| You do not need to fill out the section below if you attach a detailed, paginated list of documents that contains a description of each document which allows a member to understand why it is relevant to the particular claim. Documents over five pages must include an indication of which pages are relevant to the claim. |                         |  |  |  |  |  |
| Additional Instructions:  |                         |  |  |  |  |  |
| <ul> <li>If a document is more than five (5) pages, you must provide the location (e.g., page number or paragraph) of the specific passages that are important for your claim.</li> <li>If you are submitting more than one (1) document, you must provide an explanation for each document.</li> </ul>                         |                         |  |  |  |  |  |
| If you are submitting more than six (6) documents, attach date, number of pages, page reference, and relevance of   |                         |  |  |  |  |  |
| Did you review the relevant National Documentation Package  | e(s)? Yes No            |  |  |  |  |  |
| Is the information in your documents found in the National Documention Package(s)? Yes No   |                         |  |  |  |  |  |
| How many pages (in total) is your disclosure?   |                         |  |  |  |  |  |





| 1.  | Title of document:   | Author:          |   |  |  |  |
|---|--|------------------|---|--|--|--|
|   | Date of document:  | Number of pages: | Page reference:                         |  |  |  |
|   | l us why this document is important for the documents to support your reasons, but it is |                  | e. You may also attach additional pages |  |  |  |
| 2.  | Title of document:   | Author:          |   |  |  |  |
|   | Date of document:  | Number of pages: | Page reference:                         |  |  |  |
|   | l us why this document is important for the documents to support your reasons, but it is |                  | e. You may also attach additional pages |  |  |  |
| 3.  | Title of document:   | Author:          |   |  |  |  |
|   | Date of document:  | Number of pages: | Page reference:                         |  |  |  |
| Tell us why this document is important for the hearing of your case. You may also attach additional pages or documents to support your reasons, but it is not required. |  |                  |   |  |  |  |
| 4.  | Title of document:   | A                | uthor:                                  |  |  |  |
|   | Date of document:  | Number of pages: | Page reference:                         |  |  |  |
| Tell us why this document is important for the hearing of your case. You may also attach additional pages or documents to support your reasons, but it is not required. |  |                  |   |  |  |  |





| 5.   | Title of document:   | Aut                    | hor:           |                         |  |  |  |  |
|--|--|------------------------|----------------|-------------------------|--|--|--|--|
|  | Date of document:  | Number of pages:       | Page           | e reference:            |  |  |  |  |
|  | Tell us why this document is important for the hearing of your case. You may also attach additional pages or documents to support your reasons, but it is not required.  |                        |                |                         |  |  |  |  |
| 6.   | Title of document:   | Aut                    | thor:          |                         |  |  |  |  |
|  | Date of document:  | Number of pages: _     | Page           | e reference:            |  |  |  |  |
|  | I us why this document is important for the hadocuments to support your reasons, but it is   | • •                    | You may also a | attach additional pages |  |  |  |  |
| Su   | bmit your form   |                        |                |                         |  |  |  |  |
| <ul> <li>You can submit this form to the RPD as follows:</li> <li>Via email <u>irb.RPDapplications-DemandesSPR.cisr@irb-cisr.gc.ca</u> (preferred, for individuals without counsel only)</li> <li>Via My Case Portal (preferred, available to counsel only)</li> <li>Via in-person, fax or mail to the RPD Registry <ul> <li>To find the RPD Registry for your region, consult <a href="https://irb.gc.ca/en/contact/Pages/contact3.aspx">https://irb.gc.ca/en/contact/Pages/contact3.aspx</a>.</li> </ul> </li> </ul> |  |                        |                |                         |  |  |  |  |
| То   | be filled out by the claimant or protected   | l person:              |                |                         |  |  |  |  |
|  | <ol> <li>Is the Minister a party? They are a party if you have received a Notice of Intention to Intervene (refugee claims only) or if the Minister made an application to cease or vacate. Yes No</li> <li>If yes, you must send this form to the Minister as well. Tell us how you sent a copy of this form to the Minister (fax, mail, etc.)</li> </ol> |                        |                |                         |  |  |  |  |
| To be filled out by the Minister (if applicable):  |  |                        |                |                         |  |  |  |  |
| Ind  | licate how you sent a copy of this form to the   | e claimant/protected p | erson or couns | sel (email, fax, etc.). |  |  |  |  |
| This form was completed by: on:  |  |                        |                |                         |  |  |  |  |
|  | (print name of claimant/protected person or counsel) date (yyyy-mm-dd)   |                        |                |                         |  |  |  |  |