NEW gTLD PROGRAM: 2026 ROUND

National Governments
Appeal Funding Request

This form serves as a request for funding the filing fees and costs associated with an appeal to a Panel Determination in the context of the New gTLD Program: 2026 Round. For more information, refer to National Government Objection and Appeal Funding Instructions.

Government and Filing Authority	
National Government*	
Full Legal Name of Filing Authority/Entity* ***In Latin characters*** *Entity, department, or similar division of the above-named national government responsible for filing the identified objection. Provide the full legal name as it appears on the official registration documents. Do not use abbreviations.*	
Business Address of Filing Authority/Entity* ***In Latin characters***	
Jurisdiction of Filing Authority/Entity* *The jurisdiction indicates the location in which the Filing Authority/Entity is registered for legal and financial purposes. This is either 1) a country name, or a 2) state/territory name, depending on where the Filing Authority/Entity is registered. No additional information should be provided. Examples include "Delaware", "Germany", etc.*	
Point of Contact *Individual responsible for filing the objection; this person will be contacted if ICANN has any questions regarding this funding request.* • *If the national government is a Governmental Advisory Committee (GAC) member with GAC representation, the point of contact **must** be the GAC representative.* • *If the national government is a GAC member without GAC representation or is not a GAC member, the point of contact must be within and under the direct authority of the Head of Government or equivalent.* ***If the individual appearing here is not the same individual that files the objection, ICANN will not be in the position to fund the objection.***	
Point of Contact Full Legal Name* ***In Latin characters*** *As it appears on their passport of government-issued ID.*	

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Appeal Funding Request

Point of Contact *(continued)*	
Point of Contact Position/Title*	
Point of Contact Phone Number*	
Point of Contact Email Address*	
Point of Contact Country of Residence*	
Point of Contact Year of Birth*	
Point of Contact Current Employer*	
Point of Contact Current Employer Country*	
Application Information	
Application ID* *The unique application ID as published in Application Publication and Statistics (APS).*	
String* *The applied-for gTLD against which the objection was filed; Internationalized Domain Name (IDN) strings should be in A-Layer format.*	
Applying Entity Name* *Full name of the entity that applied for the gTLD.*	
Objection ID* *The unique objection ID.*	

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Disclaimer

By submitting this form, the requester agrees and acknowledges that its personal data will be processed in accordance with the ICANN Privacy Policy and the New gTLD Program: 2026 Round Privacy Policy, which can be found in Appendix 9 of the New gTLD Program: 2026 Round Applicant Guidebook (Applicant Guidebook), and also agrees to abide by ICANN's electronic Terms of Service. The requester further acknowledges that the information provided in the fields marked with an asterisk (*) will be made publicly available.

The information requested by this form does not represent all requirements and/or criteria that the eligible national government must satisfy to file an appeal directly with the DRSPs. Each eligible national government is responsible for meeting the applicable requirements as set forth in the Applicant Guidebook and for filing the appeal directly with the DRSP. ICANN is not providing any eligible national government with legal, financial, business or other advice. This form does not represent a modification to the Applicant Guidebook. This form does not represent a waiver of any ICANN policy, procedure, or agreement. In the event that any information provided in this form appears to be inconsistent with any information published elsewhere by ICANN, you should not rely on this form without confirmation or clarification from ICANN. ICANN reserves the right to reject funding requests.

ICANN Use Only		Case Number	
Received Date		Completed Date	
☐ *Approved* ☐ *Denied*			
Notes:			