# **Appeal To The First-Tier Tribunal (Immigration And Asylum Chamber)**

A. Do you want to have your appeal decided at an oral hearing or on the papers?	Tiels are her
Oral hearings take place in the UK. You should tick the 'oral hearing' box if you want to have an oral hearing that your sponsor and/or your representative plan to attend. You will need to pay the appropriate fee for an oral hearing.	Tick one box  Oral Hearing
You should tick the 'paper hearing' box if no one will attend and you want to have your case determined on the papers provided. You will need to pay the appropriate fee for a paper hearing.	☐ Papers
B. If you have chosen to have an oral hearing, please mark the box of anyone who will be attending your hearing to give evidence.	Sponsor
be attending your nearing to give evidence.	Witness
	☐ Your representative
C. Are you in receipt of legal aid funding	Yes No
Legal Aid Reference Number	
For Staff Use Only	
Date Appeal Lodged  Online Payment Amount (£)	
Online Payment Amount (£)  Payment URN	
Submission URN	
Payment made by	
Relationship	
Appeals Linked to Payment	
Appellant email address	

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<b>D.</b> Are you paying for the appeals of any mem appeal against an immigration decision?	☐ No				
		Yes (Give details in the table below)			
Name	Relationship	Appeal number / Post reference number			

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	Appeal Lodged: (For FTT(IAC) use only)		Type of decision: Tick one box  Asylum  Non Asylum
Do you wish to have your appeal decided An oral hearing is a hearing at which you will you fail to do so. An appeal on the papers mon the appeal form and any other documents	I have the opportunity to eans that the appeal wi	attend, but the hear Il be decided on the i	
Section 1 - Personal Information			
A. Family Name or Surname			
(For instance as shown on your passport)			
<b>B.</b> Given or First Name(s)  (For instance as shown on your passport)			
C. Title (Mr / Mrs / Miss / Ms or Other)			
D. Date of birth (Day/Month/Year)			
E. Gender	Male	Female	
F. Address where you can be contacted.			
Notice: If you change your address, you me the First-tier Tribunal immediately in wr			
	Postcode		
Emai	Address		
G. Nationality (if more than one, state all)			
H. If you have chosen to have an oral hearing be attending?	, who will Your	representative	Witnesses

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I. Will anyone giving evidence at the hearing need an interpreter?
You should only request an interpreter if an individual who cannot speak English will be attending and giving evidence at your hearing.
Who:
Language:
Dialect:
J. If anyone attending the hearing has a disability, state any special requirements they have.
Section 2 - Your Home Office Decision (refer to your Notice of Decision)
A. Home Office Reference Number
B. Port Reference Number
C. Case Outcome ID
D. Method of service by UKBA Post Fax/Personal Service Courier
Other (please specify)
E. Date you left the UK following Refusal Decision
F. Date of Refusal Decision
(the date of the decision against which you are appealing)
G. Date you received your Notice of Decision
H. Are you sending your Notice of Decision?  Yes No - please explain below
Applying for Anonymity
The tribunal will publish your name on documents relating to your case which can be viewed publicly. You can apply to the tribunal for anonymity which, when granted, will result in the tribunal removing your name from all published documents.
The Application for Anonymity form can be found online at: <u>hmctsformfinder.justice.gov.uk/HMCTS/GetForm.do?court_forms_id=2877</u> .

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# Section 3 - Your Appeal

<ul> <li>Your appeal must be received at the Tribunal not later than <u>28 Calendar days</u> after;</li> <li>The date of your departure from the United Kingdom when your right of appeal can only be exercised after you have left the United Kingdom; or in all other cases;</li> <li>The date you received the notice of decision from the Home Office</li> </ul>
<b>A.</b> If you know your appeal is late, or you are not sure if it will be received in time, you must apply for an extension of time. Explain why your appeal is late in the box below.
<b>B.</b> If you are sending any other documents to support your appeal, they must be in English or a certified translation. Please list them here:

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If you are <b>intending</b> to send	other documents th	at are not yet ava	ilable to you. Plea	ase list them here	

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#### D. Grounds of your appeal

You must:

- Let us know the reasons you disagree with the decision on the Notice of Decision document.
- Include any information that has not been mentioned in the Notice of Decision and say whether you have raised these issues
  hefore
- You **must** give as much detail as possible as you may not be allowed to mention any further grounds at a later date. You should send any additional evidence to the tribunal as soon as possible

If your appeal relates in whole or in part to an **Asylum decision**, complete all of **boxes 1 to 6** as applicable. You should also complete box 7 if you are not sure which boxes apply to you or there are other points in the refusal letter that you disagree with. If your appeal relates to an **Immigration** decision complete **box 8** 

If your appeal relates	s to an <b>Immigration</b> decision complete <b>box 8</b>
Asylum Decision	
1. If you disagree with in this box, and give	th the Home Office's interpretation of <b>the situation in your country</b> , please explain why ve reasons to support your point of view.

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1. Continued.			

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1. Continued.			

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2. If the Home Office has suggested that please explain why in this box.	you could live safely in another part of the country of origin, and you disagree,

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2. Continued.		

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2. Continued.	

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3. If the Home Office has stated that your claim is <b>not credible</b> , and you disagree, please explain why in this b	0X.

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3. Continued			

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3. Continued			

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4. If the Home Office has stated that you do not qualify as a refugee on grounds of race, religion, nationality, membership of a particular social group or political opinion (under the criteria of the 1951 Geneva Convention), and you disagree, please explain why in this box.					

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4. Continued		

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5. If the Home Office has stated that specific articles of the European Convention on Human Rights (ECHR) do not apply to your case, and you disagree, please explain why in this box.	

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5. (	Continued.			

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5. Continued.			

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6. If the Home Office has stated that you do not qualify as a person who is eligible for humanitarian protection (under the Refugee or Person in Need of International Protection Regulations 2006), and you disagree, please explain why in this box.						

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6. Continued		

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6. Continued		

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7. If there is anything else that you disagree with in the Home Office letter, please explain why in this box.				

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7. Continued.		

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. Continued.	

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Non-Asylum Decision			
8. If your appeal relates to a non-asylum paragraphs of the refusal letter.	decision with which you disa	gree, you must give your reasons	s below and refer to the

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8. Continued.	

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8. Continued.		

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	Date	Appeal number	(if known)	
	Julio	, ippour number	(II IIIIOIIII)	
To the best of your knowle your family, a Dependant of made an appeal or are the United Kingdom immigration	or anyone planning to a ey planning to appeal a	accompany you	Yes - give details below	
Name		Relationship	Appeal Post refere	number / nce number
ection 4 - Your decl	aration			
you are the appellant and a	are completing this form	m yourself, you must sign and o	date this declaration.	
		ded fee payment or payment ca erefore apply for a Lord Chance		
De	claration - I, the appe	llant, believe the facts stated in	n this appeal form are true.	
		Agreed Date		
i .				

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Section 5 - Representative Details (refer to guidance notes)				
A. Name of Representative				
B. Name of Representative's Organisation (if any)				
C. Postal address for correspondence				
Postcode				
D. Reference for correspondence				
E. Telephone number				
F. Mobile telephone number				
G. Fax number				
H. Email address				
I. Legal Aid reference number				
J. Legal Aid Area				
Declaration by the representative - to be completed only when signing on behalf of the person named in Section 1 of this form  I, the representative, am giving notice of appeal in accordance with the appellant's instructions and the appellant believes that the facts stated in this appeal form are true.				
Agree	eed Date			
Legal Aid  I, the representative certify that the appellant is in receipt of Legal Aid and is therefore exempt from paying a fee on this appeal.				
Agree	ped Date			
	ata Protection statement provided in this form will not be used by the First-tier Tribunal, for any purpose			

Information, including personal details that you have provided in this form will not be used by the First-tier Tribunal, for any purpose other than the determination of your application. The information may be disclosed to other government departments and public authorities only, for related immigration or asylum purposes.

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