

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?**

You should tick the 'oral hearing' box if you want to have an oral hearing that you 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

☐ Witness

☐ Your representative

C. Are you in receipt of legal aid funding, Asylum Support Finding or support under s.17 of the Children's act 1989?

☐ No

☐ Legal Aid

☐ Asylum Support

☐ Section 17

You should provide a reference and any supporting documents. Failure to do so may result in a fee being required.

Reference Number

For Staff Use Only

Date Appeal Lodged

Online Payment Amount (£)

Payment URN

Submission URN

Payment made by

Relationship

Appeals Linked to Payment

Appellant email address

D. Are you paying for the appeals of any member of your family or anyone planning to appeal against an immigration decision?

☐ No

☐ Yes (Give details in the table below)

Name	Relationship	Appeal number / Post reference number

UKBA International Group:
(for UKBAIG use only)

Appeal Lodged:
(For FTT(IAC) use only)

Type of decision: *Tick one box*

☐ Asylum

☐ Non Asylum

Do you wish to have your appeal decided on the papers or at an oral hearing?

An **oral hearing** is a hearing at which you will have the opportunity to attend, but the hearing may go ahead if you fail to do so. An appeal **on the papers** means that the appeal will be decided on the information you provide on the appeal form and any other documents submitted as evidence.

☐ Oral Hearing

☐ Papers

Section 1 - Personal Information

A. Family Name or Surname

(For instance as shown on your passport)

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 **must** notify the First-tier Tribunal immediately in writing.

Postcode

G. Prison Reference (if applicable)

H. Nationality (if more than one, state all)

I. If you have chosen to have an oral hearing, who will be attending?

☐ Yourself

☐ Your representative

☐ Witnesses

J. Will anyone giving evidence at the hearing need an interpreter?

☐ No

☐ Yes - give details below

Who:

Language:

Dialect:

K. If anyone attending the hearing has a disability, state any special requirements they have.

If you are detained under the Immigration Acts or in prison serving a criminal sentence, please provide the following information:

L. Are removal directions currently set for you? ☐ Yes ☐ No

M. Time of removal

N. Date of removal

O. Are you currently serving a criminal sentence? ☐ Yes ☐ No

P. If yes, what date is your sentence due to end?

Q. What category prisoner are you?
(please tick as appropriate)

☐ A ☐ B ☐ C ☐ D

Section 2 - Your Home Office Decision (refer to your Notice of Decision)

A. Home Office Reference Number

B. Port Reference Number

C. COHID Reference

D. Method of service of decision.

☐

Post

☐

Fax / Personal Service

☐

Courier

Other (please specify)

E. Date of Refusal Decision

(the date of the decision against which you are appealing)

F. Date Notice of Decision sent

G. 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:

hmctsformfinder.justice.gov.uk/HMCTS/GetForm.do?court_forms_id=2877.

Section 3 - Your Appeal

Your appeal must be received at the **Tribunal** not later than **14 Calendar days** after you are sent the notice of the decision by the Home Office.

A. 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. You should send any supporting evidence to the tribunal as soon as possible.

B. If you are sending any other documents with this form to support your appeal, they must be in English or a certified translation. Please list them here:

C. If you are **intending** to send other documents that are not yet available to you. Please list them here:

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 before.
- You **must** give as much detail as possible, as you may not be allowed to mention any further grounds at a later date.

If your appeal relates in whole or in part to an **Asylum decision**, complete **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 a **immigration** decision complete **box 8**.

You should send any additional evidence to the tribunal as soon as possible.

Asylum Decision

1. If you disagree with the Home Office's interpretation of **the situation in your country**, please explain why in this box, and give reasons to support your point of view.

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

3. If the Home Office has stated that your claim is **not credible**, and you disagree, please explain why in this box.

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.

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.

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.

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

Non-Asylum Decision

8. If your appeal relates to a non-asylum decision with which you disagree, you must give your reasons below and refer to the paragraphs of the refusal letter

Statement of additional grounds

If your notice of decision requires you to make a **statement of additional grounds**, you should make the statement in the box below. If there are any **other reasons** why you think :

- you should be allowed to stay in the United Kingdom, including any reasons relating to the European Convention on Human Rights
- you should not be required to leave

Do not repeat any grounds and reasons that you have already given in Section 3D.

E. Have you appealed against any other immigration decision in the **United Kingdom or overseas?** ☐ No ☐ Yes - give details below

Date	Appeal number (if known)

F. To the best of your knowledge and belief has any member of your family, a Dependant or anyone planning to accompany you made an appeal or are they planning to appeal against a United Kingdom immigration decision? ☐ No ☐ Yes - give details below

Name	Relationship	Appeal number / Post reference number

Section 4 - Your declaration

If you are the appellant and are completing this form yourself, you must sign and date this declaration.

If a fee is payable for my appeal, if I have not provided fee payment or payment card details, I undertake to pay the fee in accordance with the instructions I receive from the tribunal. I therefore apply for a Lord Chancellor's Certificate of Fee Satisfaction.

Declaration - I, the appellant, believe the facts stated in this appeal form are true.

☐ Agreed

Date

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.

☐

Agreed

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.

☐

Agreed

Date

Notice to representatives

You must notify the First-tier Tribunal, and other parties, if you cease to represent the appellant. If the appellant changes representative, details of the new representative should be sent to the same address to which you are sending this form. Please give **the appellant's full name, address, and Post Reference number.**

Data Protection statement

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