

## Appeal To The First-Tier Tribunal (Immigration And Asylum Chamber) Against A Decision Of An Entry Clearance Officer

**A. Do you want to have your appeal decided at an oral hearing or on the papers?**

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☐ Witness☐ Your representative**C. Are you in receipt of legal aid funding**☐ Yes ☐ No

Legal Aid Reference Number

**For Staff Use Only**

Lord Chancellor's Certificate of Fee Satisfaction issued date / /

No Lord Chancellor's Certificate of Fee Satisfaction issued date / /

- 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)

**You should note that the total fee you pay will be calculated by the tribunal based on this information**  
[continue on a separate sheet if required]

Name	Relationship	Appeal number / Post reference number

## PAYING YOUR APPEAL FEE

Unless your appeal is of a type exempt from payment, you are in receipt of Legal Aid or Asylum Support or support under Section 17 of the Children's Act 1989, or you have applied for and received a fee remission under the Lord Chancellor's exceptional power you will need to pay a fee. If you do not do so, your appeal will either be rejected or struck-out without a decision being made on it.

If you wish to pay your fee using a payment card, please provide the details below. You should ensure that the payment card you provide has sufficient credit to cover the fee, which will be taken in Pounds Sterling. If your card is declined then your appeal will be delayed whilst we contact you for an alternative payment.

Please note that as an alternative to sending this form to the tribunal, you can lodge your appeal online and pay your fee at [URL]

If you are unable to pay now using a payment card, you should send your appeal ensuring that you sign at section 4 to indicate that you understand that a fee is payable, and will pay the fee when given instructions to pay by alternative methods. Tribunal staff, on behalf of the Lord Chancellor, will write to you once your appeal is received, providing you with details of the methods available for you to pay your fee.

### Payment card details

If you choose to pay your fee by providing details of a payment card, please enter them below. You should ensure that you enter them carefully since if the tribunal is unable to process these details it could delay your appeal.

Once your payment has been processed, the tribunal will destroy your payment card details.

**Card number:**

**Name on the Card:**

**Expiry date:**

**Start date:**

**Issue number:**

**Security Code:**

I authorise Her Majesty's Courts and Tribunal's Service to debit from the payment card the appropriate fee for my appeal

Signed

Name

Date

UKBA International Group:  
(for UKBAIG use only)

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

Type of decision: *Tick one box*

☐ Settlement

☐ Non Settlement

☐ Family Visit

## 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. Your address or an address where you can be contacted, **including the country**.

**Notice:** If you change your address, you **must** notify the First-tier Tribunal immediately in **writing**.

Postcode

Email Address

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

## Section 2 - Your ECO Decision (refer to your Notice of Decision)

A. Is your refusal a points based system (PBS) decision ☐ No ☐ Yes

B. Post Reference Number

C. Name of decision making Post

D. Method of Service by ECO

☐ 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 you received your Notice of Decision

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 publically. 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](https://hmctsformfinder.justice.gov.uk/HMCTS/GetForm.do?court_forms_id=2877)

and should be completed and returned with this appeal form.

### Section 3 - Your Appeal

Your appeal must be received at the Tribunal not later than **28 Calendar days** after you receive the notice of the decision from the Entry Clearance Officer (ECO) or Secretary of State.

**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. Attach any evidence / additional sheets if necessary.

**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:

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.
  - Give as much detail as possible, as you may not be allowed to mention any further grounds at a later date. Attach any evidence / additional sheets of paper if necessary.
-



D. Continued

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. Will anyone attending your hearing require an interpreter? ☐ No ☐ Yes - give details below

**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:

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

## Section 4 - Your declaration

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

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

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.

Signature:

Date

## Data Protection statement

Information, including personal details that you have provided in this form will not be used by the Visa Section, or 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.

**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 / mobile number

F. Fax number

G. Email address

H. Legal Aid reference number

I. 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.

Representative's Signature:

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.

Representative's Signature:

Date

**Section 6 - Sponsor Details (refer to guidance notes)**

A. Family Name or Surname

B. Given or First Name(s)

C. Title

D. Postal Address for correspondence

Postcode

E. Telephone number / mobile number

F. Email address

**I give authorisation for my sponsor to receive information relating to my appeal**☐

Yes

☐

No

Appellant's / Representative's signature:

Date

**Please note that if a sponsor is named in this section, the First-tier Tribunal may write to him / her to ask for confirmation of that person's intention to act as a sponsor.**