

IAFT-1

Part A

Appeal against an In Country Decision – Information sheet

Complete this form if you are appealing from **inside** the United Kingdom and you have the right to do so. To help you complete this form, refer to the guidance provided.

Help can also be found at <https://www.gov.uk/immigration-asylum-tribunal>.

You can also lodge your appeal online and pay your fee at <https://immigrationappealonline.justice.gov.uk/IACFees>

Please retain this information sheet

Completing the form

The completed form should be:

- Written in **English**
- Written in **BLOCK CAPITAL LETTERS** using black ink
- Received by the Tribunal at the address shown on bottom of Part B no later than **14 calendar days** after you are sent the Refusal Letter by the Home Office.

Please tick the boxes where appropriate, to show your answer.

Checklist

Before you submit your appeal use the checklist below to ensure that we can successfully create your appeal.

- Have you provided credit/debit card details?
- Have you enclosed a copy of your **Refusal Letter**?
- Have you enclosed a copy of the **Reasons for Refusal** which were attached to your Refusal Letter?
- Have you provided details of the **Grounds** of your appeal?
- Have you provided us with **Out of Time reasons** (if applicable)?
- Have you provided us with photocopies of your documents?
(Do not send original documents e.g. Passport, Marriage/Birth certificate/ID Card)
- Have you completed **all** the relevant sections?
- Have you signed the relevant declarations at page 1, page 11 and page 12?

Please Note: Incomplete appeal forms will be returned to addressee.

Appeal against an In Country Decision – Information sheet

Returning the form

- Please detach this information sheet to keep for your records; please do not send it with the completed form.
- You must send **all pages** of a completed form to the First-tier Tribunal in the United Kingdom together with your fee (if applicable) by providing us with your credit/debit card details on page 1.
- **Please note, we are unable to accept cash, cheques or American Express.**
- To avoid delays to your appeal, you can submit your appeal online (see link on top of page 1) where you can pay your fee using a debit or credit card.
- If you submit your appeal without payment details, the Tribunal will write to you with further instructions about how you can pay your fee. This will delay the processing of your appeal.
- Send your completed appeal form **together with the copy of your Refusal Letter** and any other documents to the First-tier Tribunal either by **post** to:

First-tier Tribunal (Immigration and Asylum Chamber)

PO Box 6987

Leicester

LE1 6ZX

United Kingdom

Or you can FAX to: 0044 (0)870 739 4053

- You can either post **or** fax your appeal but **do not do both**, as this could cause delays to your appeal and result in payment being taken more than once.

Documents to send

You must provide:

- The **signed and completed Appeal Form (IAFT-1) for each person wishing to appeal**
- A copy of your **refusal Letter** (if you do not send this you must explain why)
- A copy of the **Reasons for Refusal** (which you should have received with the Refusal Letter)
- **Photocopies** of any other documents in support of your appeal (in English or a certified translation)
- A completed **Application for Anonymity** form if you do not want the Tribunal to publish your name on any court documents which can be viewed publicly.

Please do not provide any original documents (e.g. Passports, Marriage/ birth Certificates, Identification cards).

Handling such documents results in a delay to our process. Alternatively, you can provide photocopies.

Changes and contacting us

You **must** notify the Tribunal in writing if you change your address or representative. If you need to contact us after you have made your appeal, the details are:

By **letter** to:

First-tier Tribunal

(Immigration and Asylum Chamber)

PO Box 6987

Leicester

LE1 6ZX

Telephone: 0044 (0)300 123 1711

By **fax** to: 0044 (0)870 739 5895

By **e-mail:** customer.service@hmcts.gsi.gov.uk

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Appeal against an In Country Decision – 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.

More information about the circumstances where you do not have to pay a fee can be found in our fees guidance leaflet T495 available from <http://hmctsformfinder.justice.gov.uk>

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 and pay your appeal online at <https://immigrationappealsonline.justice.gov.uk/IACFees>

If you are unable to pay now using a payment card, you should send your appeal ensuring that you sign the declaration on page 11 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.

Please note we are unable to accept cash, cheques or American Express.

Payment card details

If you are paying your fee by payment card, please enter the details below. You should ensure that you enter them carefully since if the Tribunal is unable to process these details it could delay your appeal. **Do not send in your credit card details to us more than once** unless we write to you asking that you submit further card details to us.

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

By completing the details below, you authorise HM Courts and Tribunals Service to debit from the payment card the appropriate fee for your appeal.

Signed (cardholder)

Date

Name

Email receipt required?
(if yes, please tick box)

Email
address

Card number

Name on the Card

Start date (mm/yy)

Expiry date (mm/yy)

Issue or CVC Number
(CVC number is the last 3
digits on signature strip)

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Form IAF-T-1

Appeal against an In Country Decision

a. Do you want to have your appeal decided at an oral hearing or on the papers? (tick one box)

Oral Hearing 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.

Paper 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.

b. If you have chosen to have an oral hearing, please mark the box of anyone who will be attending your hearing.

Sponsor Your representative
 Witness

c. Are you in receipt of legal aid funding, Asylum Support Funding or support under s.17 of the Children Act 1989? Please tick as appropriate.

No (If no, complete payment details on page 1) 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.

Legal Aid/Asylum support Ref Number:

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

Yes (If yes, give details in the table below) No

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

Please see page 1 for details of how to pay a fee

For Staff Use Only

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

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

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Form IAF-1

Appeal against your Home Office decision

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

Type of Decision:

(tick one box)

Asylum

Immigration

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.
Note: If you are detained, please provide the address where you are currently held (Prison, IRC or Detention centre)

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

Postcode:

g. Appellant's email address

h. Prison Reference (if applicable)

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

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

Yourself Your representative Witness

k. Will anyone giving evidence at the hearing need an interpreter? If more than one language or interpreter is required, you may wish to indicate on a separate sheet. Please do not request an English interpreter.

Yes If yes, give details below No

Who:

Language:

Dialect:

l. 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:

- m.** Are removal directions currently set for your removal? Yes No
- n.** Time of removal (insert time and circle AM or PM) AM / PM
- o.** Date of removal / /
- p.** Are you currently serving a criminal sentence? Yes No
- q.** If yes, what date is your sentence due to end? / /
- r.** What category prisoner are you? **A B C D**
(please circle as appropriate)

Section 2 – Your Home Office Decision (refer to your Refusal Letter)

- a.** Home Office reference number /
- b.** Port reference /
- c.** COHID reference
- d.** Home Office A-N reference
- e.** Date of application to Home Office / /
- f.** Date of Home Office Decision / /
- g.** Method of service of decision Post Fax/Personal service
 Courier Other (please specify)
- h.** Date refusal letter sent by Home Office / /
- i.** Have you been served with a deportation decision? Yes No
- j.** If you are **not** sending in your refusal letter please explain why in this box:

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 <http://hmctsformfinder.justice.gov.uk/HMCTS/FormFinder.do> and should be completed and returned with this appeal form.

Section 3 – Your Appeal

Your appeal must be received at the **Tribunal via the address** shown on Part B of the information sheet no later than **14 Calendar days** after you are sent the Refusal Letter by the Home Office.

a. Late appeal

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 this box below. Attach any evidence/additional sheets if necessary.

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 which you intend to rely on at the hearing but have not yet been made available to you, please list them here:

d. Grounds of your appeal

- You **must** let us know the reasons you disagree with the decision in the Refusal Letter.
- Include any information that has not been mentioned in the Refusal Letter 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. Attach any evidence / additional sheets of paper if necessary.
- If your appeal relates in whole or in part to an **Asylum decision**, complete all of **boxes 1 to 6** that apply to you.
- If you are not sure which boxes apply to you or there are other points of the refusal letter that you disagree with, write your grounds in **box 7**.
- If your appeal relates to a **Non Asylum** decision complete **box 8**.

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. (Continue on a separate sheet if necessary.)

Statement of additional grounds

If your Refusal Letter requires you to make a **Statement of additional grounds**, you should make the statement in this box. 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?

Yes If yes, give details below

No

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?

Yes If yes, give details in the table below

No

Name	Relationship	Appeal number/ HO reference number

Section 4 – Your declaration

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

Declaration by appellant

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 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 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

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.

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:

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**.