

IAFT-5(DIA) Appeal to the First-tier Tribunal – Information sheet

Complete this form only if you (the Appellant) have a right of appeal from within the United Kingdom, are detained at an Immigration Removal Centre and this form was issued with your refusal letter.

To help you complete this form, refer to the guidance provided. Help can also be found at <https://www.gov.uk/immigration-asylum-tribunal>.

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 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 enclosed a copy of your **Refusal Letter**?
- Have you enclosed a copy of your **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 7 and page 8?

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

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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
- 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)

IA Harmondsworth

Colnbrook By-Pass

Harmondsworth

Middlesex

UB7 0HD

Or you can FAX to: 0870 761 7721

- You can either post **or** fax your appeal but **do not do both**, as this could cause delays to your appeal. Or you can give it to the person having custody of you.

Documents to send

You must provide:

- The **signed and completed Appeal Form IAFT-5(DIA) 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.

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 have any queries after you have submitted your appeal you can contact the Tribunal hearing centre dealing with your appeal. Initially this will be IA Harmondsworth (see below) but once you have received your IA30 listing notice you should use the contact details on that letter.

IA Harmondsworth: Tel: 020 8750 7760

IAFT-5(DIA)

Appeal against your Home Office Decision

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

Type of Decision: (tick one box)

Protection (PA)

Human Rights (HU)

Revocation of Protection Status (RP)

EEA (EA)

EU Settlement Scheme (includes deportation cancellation and curtailment decisions)

Frontier worker decision (refusal to issue or renew and revocation of permit)

Deprivation of Citizenship (DC)

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) Provide the name and address of the Immigration Removal Centre where you are detained

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

Postcode:

g) **Nationality** (if more than one, state all)

h) **Who will be attending your hearing?**

Yourself Your representative Witness

FIRST-TIER TRIBUNAL IMMIGRATION AND ASYLUM CHAMBER

i) 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:

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

k) Are removal directions currently set for you? Yes No

l) **Time of removal**
(insert time and circle AM or PM)

AM / PM

m) **Date of removal**

/ /

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) Method of service of decision Post Fax/Personal service

Courier Other (please specify)

g) Date Refusal Letter sent / /

h) Date of application to Home Office / /

i) Have you been served with a deportation order? 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 [gov.uk/government/publications/form-application-for-anonymity-iat-application-for-anonymity-iat](https://www.gov.uk/government/publications/form-application-for-anonymity-iat-application-for-anonymity-iat) 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 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 on the Refusal Letter document.
- 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 and should raise all the grounds of appeal you wish to rely on. The Tribunal is not permitted to consider grounds that you raise which have not been the subject of a decision by the Home Office unless the Home Office agrees to the Tribunal considering those new grounds.
- Attach any evidence/additional sheets of paper if necessary.
- If your appeal relates in whole or in part to a refusal of a **Protection claim**, complete **boxes 1 and/or 2** that apply to you.
- If your appeal relates only to the refusal of a **Human rights claim**, complete **box 3**.
- If your appeal relates only to a **Revocation of Protection Status Decision**, complete all of **boxes 4 and 5** that apply to you.
- If your appeal relates in whole or in part to an **EEA Decision**, EU Settlement Scheme (includes deportation cancellation and curtailment decisions) or frontier worker decision (refusal to issue or renew and revocation of permit or deportation) or healthcare visitors (includes refusal to issue or renew leave or deportation) complete **box 6**
- If you are not sure which boxes apply to you write your grounds in **box 7**.

Protection Decision

1. Please explain why your removal from the United Kingdom would breach the United Kingdom's obligations under the Refugee Convention.

2. Please explain why your removal from the United Kingdom would breach the United Kingdom's obligations in relation to persons eligible for a grant of humanitarian protection.

Human Rights Decision

3. Please explain why the decision to refuse your human rights claim is unlawful under section 6 of the Human Rights Act 1998. You should specify which article of the Human Rights Act you are appealing under.

Revocation of Protection Status Decision

4. Please explain why the decision to revoke your protection status breaches the United Kingdom's obligations under the Refugee Convention.

5. Please explain why the decision to revoke your protection status breaches the United Kingdom's obligations in relation to persons eligible for humanitarian protection.

6. EEA Decision

If you believe that the Home Office decision is restricting your rights under the EEA right to free movement please explain below why

If you believe the EU settlement scheme decision, EUSS family permit and travel permit, frontier worker decision EUSS Family Permit and Travel Permit or healthcare visitor decision was not in accordance with the relevant legislation/immigration rules please say why

If you believe the decision breaches the withdrawal agreement, EFTA separation agreement or Swiss citizens' rights agreement please explain why.

Other

7. If you are unsure which box to please provide details in this box.

New Matters

Please describe in this box any new reasons for:

- Wishing to enter or remain in the UK, or.
- Grounds on which you should be permitted to enter or remain in the UK, or
- Grounds on which you should not be removed from or required to leave the UK **provided that** you have already informed the Home Office about these reasons in response to a notice served on you in terms of section 120 of the Nationality, Immigration and Asylum Act 2002.

- 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)
<input type="text"/>	/	<input type="text"/>	<input type="text"/>
<input type="text"/>	/	<input type="text"/>	<input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/>

- 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
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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.

Signature

Date:

 / /

Data Protection statement

For information on how HM Courts and Tribunals Service process and store your data visit:

www.gov.uk/hmcts/privacy-policy

Section 5 – Representative details (refer to guidance notes)

a) Name of representative	<input type="text"/>
b) Name of Representative's Organisation (if any)	<input type="text"/>
c) Postal address for correspondence	<input type="text"/>
	Postcode: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
d) Reference for correspondence	<input type="text"/>
e) Telephone number	<input type="text"/>
f) Mobile telephone number	<input type="text"/>
g) Fax number	<input type="text"/>
h) Email address	<input type="text"/>
	Please tick here if you do not want to receive your final determination via email? <input type="checkbox"/>
i) Legal Aid reference number	<input type="text"/>
j) Legal Aid Area	<input type="text"/>

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:

 / /

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**.