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SCHEDULE 1

Rule 2(4)

FORMS

AIT 1 FT Notice of appeal to the Asylum and Immigration Tribunal (United Kingdom)—Fast Track

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ASYLUM AND IMMIGRATION
(TREATMENT OF CLAIMANTS, ETC.)
ACT 2004

Notice of appeal to
the Asylum and Immigration
Tribunal (United Kingdom)

Form
AIT-1-FT
Fast Track

- To complete this appeal form, please refer to the information leaflet that was sent to you with your notice of decision and this form. You can also find the leaflet on www.dca.gov.uk.
- Please complete this form in English. It is in your interest to complete this form as thoroughly as possible, and state all of your grounds in order for your appeal to be dealt with efficiently.
- Please complete Section 1 of this form by referring to the notice of decision that was sent to you by the Home Office.
- Where there is a check box , put a check (X) in it to show your answer.
- You should send your notice of decision with this form.

Section 1

- A** Home Office reference number
- B** Case Outcome ID
- C** Type of Decision
- D** Date of Service
- E** Deadline to appeal
- F** Removal Centre Address
- G** Removal Centre Telephone Number

Your decision

Non-asylum Asylum

/ /

/ /

Post Code

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Section 2

- A** Your Surname or family name
Please use CAPITAL LETTERS
- B** Your other names
- C** Your date of birth
Please give as Day/Month/Year
- D** Are you male or female?
- E** Nationality (or nationalities) or citizenship
- F** Do you have a representative?

- G** Have you appealed against any other immigration decision made in the United Kingdom?

- H 1** To the best of your knowledge, does any member of your family have an appeal pending in the United Kingdom?

Personal information

Male Female

No Yes **Your representative should complete Section 6 on page 8.**

No Yes **What type of decision did you appeal against?**
 Asylum Non-asylum

Date of the appeal

What is the appeal number, if you know it?

No Yes

| Name(s) | Relationship | Appeal number, if you know it |
|---------|--------------|-------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

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H 2 To the best of your knowledge, is any member of your family intending to appeal against an immigration decision?

No Yes

| Name(s) | Relationship | Home Office reference number, if you know it |
|---------|--------------|----------------------------------------------|
| | | |
| | | |
| | | |
| | | |

I Do you wish to have your appeal decided at an oral hearing?

No Please go directly to Section 3 on page 4.

J If you want an oral hearing, who will be present?

Yes

Yourself

Your representative

Witness/es

If you want a witness to attend your hearing, please give their name and Home Office reference number, if applicable.

K If you, your representative or a witness are attending the hearing, will you or they need an interpreter?

No Yes

Which language will be needed?
 Language:
 Dialect (if applicable):

L If you, your representative or a witness has a disability, please explain any special arrangements needed for the hearing.

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Section 3

Grounds of your appeal

In this section you must set out the **grounds for your appeal** and give the **reasons** in support of these grounds – that is, why you disagree with the decision. You must do this **now** because you may not be allowed to mention any further grounds at a later date.

Please refer to the paragraphs of the refusal letter when possible.

You should include in this section any parts of your claim that you think have not been addressed in the refusal letter. You must say if you have raised these issues before.

Give as much detail as possible: use additional sheets of paper if you need to.

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Section 4

Statement of additional grounds

If your notice of decision requires you to make a **Statement of additional grounds**, you should make that statement in this box.

This section refers to 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 removed or required to leave

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

You must give all these additional grounds and reasons **now** because you may not be able to make any other applications to appeal if this current application is refused. You should explain why you did not give these reasons before.

Section 5

Late appeal and application for extension of time

The deadline to appeal is **2 business days** from the date you received the decision. Your appeal must be received by the Tribunal or by the person having custody of you by the end of this period.

If you know your appeal is late, or if you are not sure your appeal will be received by the deadline date, **you must apply for an extension of time, and give your reasons for failing to submit your appeal in time.**

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Section 6

Representation

If you have a representative, he or she must complete this section.

A Declaration by the Representative

Representative's signature and date

B Name of the representative
Please use CAPITAL LETTERS

C Name of the representative's organisation

D Fax number of organisation
Note: It is important that you provide a fax number to ensure that you receive documents from the Tribunal as quickly as possible

E Postal address of organisation

F Reference for correspondence

G Telephone number

H Mobile number

I Email address

J Are you an organisation regulated by the Office of the Immigration Services Commissioner (OISC)?

K Is the appellant receiving publicly funded legal representation?

I, the representative, am giving this notice of appeal in accordance with the appellant's instructions, and the appellant believes that the facts stated in this notice of appeal are true.

/ /

Number / Street

Town

Post Code

No Yes **Please provide the OISC reference:**

No Yes

Notice to representatives

You must also immediately notify the Asylum and Immigration Tribunal, and other parties, if you cease to represent the appellant or if your address and/or fax number changes. 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 Home Office reference number.

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Section 7

Declaration by appellant

A Declaration by the Appellant

Appellant’s signature and date

B Name of appellant
Please use CAPITAL LETTERS

Section 8

When you have completed the form

What to do next

Keep a copy of this form for your own use. Then either:

send the original form to:

or send to:

or fax the form to:

Send the notice of decision with this form

To make sure that you are sending your notice of decision with this form, please tick this box

Documents to support you application

If you are sending any other documents with this form to support your appeal, please list them here.

If you need to contact the Tribunal

If you need to contact the Asylum and Immigration Tribunal, use your Home Office reference number and your Case Outcome ID in your correspondence.

Changes to your personal information

You must notify the Tribunal if you change your address, or if you appoint a new representative, or both.

Data Protection Statement

Information, including personal details, that you have provided in this form will not be used by the Asylum and Immigration 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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ASYLUM AND IMMIGRATION
(TREATMENT OF CLAIMANTS, ETC.)
ACT 2004

Application to the Asylum
and Immigration Tribunal
for permission to appeal to
the Court of Appeal

Form
AIT-4-FT

Fast Track

Complete this form if you want to challenge the Asylum and Immigration Tribunal determination on a point of law by appealing to the Court of Appeal.

- Please complete this form in English. It is in your interest to complete this form as thoroughly as possible, and state all your grounds in order for your application to be dealt with efficiently.
- Please complete Section 1 of this form by referring to the determination that the Tribunal sent you.
- Where there is a check box , put a check (X) in it to show your answer.
- You should send your determination with this form.
- The deadline to appeal is 2 business days from the date you were served with the decision. Your appeal must be received by the Tribunal by the end of this period.

Section 1

- A** Tribunal Appeal number
- B** Case Outcome ID
- C** Type of Decision
- D** Date of Service
- E** Deadline to appeal
- F** Removal Centre Address

- G** Removal Centre Telephone Number

Section 2

- A** Your Surname or family name
Please use CAPITAL LETTERS
- B** Your other names
- C** Your date of birth
Please give as Day/Month/Year
- D** Are you male or female?
- E** Nationality (or nationalities) or citizenship
- F** Do you have a representative?

Your decision

Non-asylum Asylum
 / /
 / /

Post Code

Personal information

/ /
Male Female

No Yes Your representative should complete Section 4 on page 3.

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Section 3

Grounds of your appeal to the Court of Appeal

- An appeal to the Court of Appeal against a determination by the Tribunal is permissible only on a **point of law**.
- An appeal may be made against a point of law in a determination relating to an asylum decision or a non-asylum decision.
- In this section you must set out the **errors of law** that you believe have been made in the determination that you would like to appeal against and give **reasons** in support of these beliefs. You must do this **now** because you may not be allowed to mention any further points of law at a later date.
- Give as much detail as possible: use additional sheets of paper if you need to.

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Section 4

Representation

If you have a representative, he or she must complete this section.

A Declaration by the Representative

Representative's signature and date

B Name of the representative
Please use CAPITAL LETTERS

C Name of the representative's organisation

D Fax number of organisation
Note: It is important that you provide a fax number to ensure that you receive documents from the Tribunal as quickly as possible

E Postal address of organisation

F Reference for correspondence

G Telephone number

H Mobile number

I Email address

J Are you an organisation regulated by the Office of the Immigration Services Commissioner (OISC)?

K Is the appellant receiving publicly funded legal representation?

I, the representative, am making this application in accordance with the appellant's instructions, and the appellant believes that the facts stated in this application are true.

_____/_____/_____

Number / Street

Town
Post Code

No Yes Please provide the OISC reference:

No Yes

Notice to representatives

You must immediately notify the Asylum and Immigration Tribunal, and other parties, if you cease to represent the appellant or if your address and/or fax number changes. 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 Tribunal appeal number.

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Section 5

Declaration by appellant

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

A Declaration by the Appellant

Appellant's signature and date

I, the appellant, believe that the facts stated in this application are true.

_____ / ____ / ____

**B Name of appellant
Please use CAPITAL LETTERS**

Section 6

When you have completed the form

What to do next

Keep a copy of this form for your own use. Then either:

send the original form to:

or fax the form to:

Send your determination with this form

To make sure that you are sending your determination with this form, please tick this box

If you are sending any other documents with this form to support your application and appeal, please list them here.

Documents to support you application

If you need to contact the Tribunal

If you need to contact the Asylum and Immigration Tribunal, use the Tribunal appeal number and your Case Outcome ID in your correspondence.

Changes to your personal information

You must notify the Tribunal if you change your address, and/or if you appoint a new representative.

Data Protection Statement

Information, including personal details, that you have provided in this form will not be used by the Asylum and Immigration 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.