

THE IMMIGRATION ACTS

Complete this form if you are appealing from outside the United Kingdom against a decision of an Entry Clearance Officer (ECO).

If you are appealing from outside the United Kingdom against **any other decision**, you must use appeal form AIT-3.

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

Form AIT-2
Overseas-Entry Clearance

- To complete this appeal form, **please refer to the information leaflet** that was sent to you with your notice of refusal and this form. You can also find the leaflet on www.ait.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 write in **BLOCK LETTERS**.
- Please complete Section 1 of this form by referring to the notice of refusal that was sent to you by the Entry Clearance Officer.
- Where there is a check box , put a check (**X**) in it to show your answer.
- You should send your notice of refusal with this form. If you do not send the notice of refusal with your appeal form, you must give your reasons in Section 8.

Appeal Lodged (For AIT use only)

Section 1

- A** Is your Refusal Notice a Points Based System (PBS) decision ?
- B** Post reference number
- C** Type of Decision
- D** Name of British Mission
- E** Date of Service of Decision
- F** Deadline to appeal
- G** Method of Service by ECO

Your ECO decision

No

Yes

Settlement

Non-Settlement

Family Visit

Post

Fax or Personal Service

Courier

Other (please specify)

Section 2

The deadline to appeal is **28 calendar days** after the date you were served with the decision. Your appeal must be received by the Visa Section or the Tribunal 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, in the box →**

- Attach any evidence to the form.
- Use additional sheets of paper if you need to.

Late appeal and application for extension of time

Section 3

- A** Surname or family name
Please use CAPITAL LETTERS
- B** Other names
- C** Address or c/o address where you can be contacted
Notice: If you change your address, you **must** notify the Asylum and Immigration Tribunal immediately, in writing. The address of the Tribunal is at the end of this form.
- D** Telephone number
Give a number where the Tribunal may contact you during the day
- E** Date of birth
Please give as Day/Month/Year
- F** Are you male or female?
- G** Nationality / Citizenship
(if more than one state all)
- H** Do you have a representative?
- I** Do you have a sponsor? (See guidance for an explanation of the term sponsor).
- J** Have **you** appealed against any other immigration decision made **either** in the United Kingdom or overseas?

- K 1** To the best of your knowledge, does any member of your family or anyone planning to accompany you have an appeal pending in the United Kingdom?

Personal Information

Number/Street	
Town	
Country	Post Code
/ /	
Male <input type="checkbox"/>	Female <input type="checkbox"/>
No <input type="checkbox"/> Yes <input type="checkbox"/>	Your representative should complete Section 6 on page 5.
No <input type="checkbox"/> Yes <input type="checkbox"/>	You should enter your sponsor's details in Section 7 on page 6.
No <input type="checkbox"/> Yes <input type="checkbox"/>	What type of decision did you appeal against? Asylum <input type="checkbox"/> Non-Asylum <input type="checkbox"/>
Date of the appeal	What is the appeal number (if you know it)
/ /	

No Yes

Name(s)	Relationship	Appeal number, or other reference if you know it. (see section 3 of the guide)

K 2 To the best of your knowledge, is any member of **your family** or anyone planning to accompany you, intending to appeal against an immigration decision?

No Yes

Name(s)	Relationship	Post / Home Office reference number, if you know it

L Do you wish to have your appeal decided on the papers or at an oral hearing?
Complete one box only

Paper Hearing

Your appeal will be decided on the information given on this form and other documents submitted.
Please go directly to Section 4 on page 4.

Oral Hearing

You will not normally be able to attend the hearing but if you have a sponsor or representative, they can attend on your behalf.
(see Section 3 of the guidance notes)

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

Your representative

Sponsor(s)

Witnesses

N Do you or any party to the hearing require an **interpreter**?

Your representative

Sponsor(s)

Witnesses

O Which language will be needed?

Language:

Dialect (if applicable):

P Does any party to the appeal have a disability?

No

Yes

If YES, please explain any special arrangements needed for the hearing.

Section 4

Grounds of your appeal

- In this section you must set out **all** the **grounds for your appeal** in the box below 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.

Section 5

Declaration by appellant

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

A Declaration by the Appellant

Appellant's signature and date

B Name of appellant
Please use CAPITAL LETTERS

I, the appellant, believe that the facts stated in this notice of appeal are true.

/ /

Section 6

Representative Details

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

A Name of the representative
Please use CAPITAL LETTERS

B Name of the representative's
organisation (if applicable)

C Postal address of organisation

D Reference for correspondence

E Telephone number

F Mobile number

G Fax number

H Email address

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

J Has the appellant been granted
publicly funded legal representation?

K Declaration by the Representative

Representative's signature and date

Number/Street

Town

Country

Post Code

No Yes

Please provide the OISC reference:

No Yes

Please provide the LSC reference number, if
applicable:

**The facts stated in this notice of appeal are true to the best of my
knowledge and belief.**

/ /

Notice to representatives

You must notify the Asylum and Immigration Tribunal, the Entry Clearance Officer, 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.**

Section 7

Sponsor Details

If you have a Sponsor, you **should** complete this section.

A	Name of the sponsor Please use CAPITAL LETTERS	<input type="text"/>												
B	What is their Immigration status ?	<input type="text"/>												
C	Name of the sponsor's organisation (if applicable)	<input type="text"/>												
D	Postal address of sponsor / organisation	<table border="1"><tr><td colspan="2">Number/Street</td></tr><tr><td colspan="2"><input type="text"/></td></tr><tr><td colspan="2"><input type="text"/></td></tr><tr><td colspan="2">Town</td></tr><tr><td>Country</td><td>Post Code</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr></table>	Number/Street		<input type="text"/>		<input type="text"/>		Town		Country	Post Code	<input type="text"/>	<input type="text"/>
Number/Street														
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<input type="text"/>	<input type="text"/>													
E	Date of Birth	<input type="text"/>												
F	Telephone number	<input type="text"/>												
G	Mobile number	<input type="text"/>												
H	Fax number	<input type="text"/>												
I	Email address	<input type="text"/>												

Notice

Please note that if a sponsor is named in this section, the Tribunal will write to him or her to ask for confirmation of that person's intention to act as a sponsor.

Section 8

When you have completed the form

1. Keep a copy of this form for your own use.
2. Then send the original form to either **1** or **2** below.
3. Please check (X) **either** box **1** or **2** below to show where you will send the form.

<p>Visa or consular section</p> <table border="1"><tr><td data-bbox="156 409 225 483">1</td><td data-bbox="225 409 293 483"></td></tr></table>	1		<p>The Visa or consular section in the country where you applied; or</p>	<p>Tribunal</p> <table border="1"><tr><td data-bbox="708 409 777 483">2</td><td data-bbox="777 409 845 483"></td></tr></table>	2		<p>The Asylum and Immigration Tribunal. You may send the form to the Tribunal, either by sending it to: Asylum and Immigration Tribunal PO Box 7866 Loughborough, United Kingdom LE11 2XZ Or by faxing it to: +44 (0)15 09 221 699</p>
1							
2							

Are you sending your Notice of Decision with this form? No Yes

If you do not send the notice of decision with the appeal form, your appeal *may* be treated on the papers unless a satisfactory reason is given here.

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:

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

Changes to your personal information

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

Data Protection Statement

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