

International Protection Act 2015 Schedule 1 International Protection Appeals

Appeal against a recommendation under section 39(3)(b).

(Recommendation to refuse refugee status only).

Appeal against a recommendation under section 39(3)(c).

(Recommendation to refuse both refugee and subsidiary protection status).

This form should <u>not</u> be used where the recommendation includes findings under section 39(4) resulting in use of accelerated appeals procedures.

Please return completed form to the International Protection Appeals Tribunal, 6-7Hanover Street East, Dublin 2.

Note: If necessary, you may attach additional pages to this form. Each additional page should be signed by you at the bottom.

Part 1: Type of appeal		
[1.1] Please tick as appropriate:		
☐ Refugee Refusal Only		
I wish to appeal against the recommendation of the International Protection Officer under section 39(3)(b) of the International Protection Act 2015 that I should not be given a refugee declaration.		
OR		
☐ Refugee and Subsidiary Protection Refusal		
I wish to appeal against the recommendation of the International Protection Officer under section 39(3)(c) of the International Protection Act 2015 that I should be given neither a refugee declaration nor a subsidiary protection declaration.		
Part 2: Applicant's Details		
[2.1] Personal Reference Number (e.g. 123456-16):		
[2.2] Full Name:		
[2.3] Any other Names used:		
[2.4] Date of Birth:/		
[2.5] Address:		

[2.6] Telephone Number(s) (if any):

[2.7] Nationality:

Name	Date of Birth	Male or female	Relationship to Applicant	Personal Ref. No.

[2.9] Details of any other family members living in the State:

[2.8] Details of any dependants included in your appeal:

Name	Date of Birth	Male or female	Relationship to Applicant	Personal Ref. No.

Note: If you have other family members with a claim for International Protection pending, the Tribunal may decide to hear the appeals together.

Part 3: Applicants under 18 and in the care of Tusla – The Child and Family Agency (if applicable)

[3.1] Name and address of Tusla – The Child and Family Agency representa	ative: -
	- -
[3.2] If you are in the care of a person other than a parent or Tusla – The C Agency, please insert here the name and address of that person.	Child and Family
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	- -

[5.2] Ground 2:	Part 4	: Legal Representation (if applicable)
[4.3] Telephone number:	[4.1]	Do you have legal representation? Yes: \square No: \square (tick as appropriate)
[4.3] Telephone number:	[4.2] N	
[4.4] Email address:		
Note: If you instruct a legal representative at a later stage of your appeal, you should inform the Tribunal of this immediately and provide the Tribunal with the relevant details. you have a legal representative, all correspondence in relation to your appeal will be sent them unless the International Protection Act 2015 requires it to be sent directly to you. Part 5: Grounds of Appeal [5.1] Ground 1:	[4.3] T	
inform the Tribunal of this immediately and provide the Tribunal with the relevant details. you have a legal representative, all correspondence in relation to your appeal will be sent them unless the International Protection Act 2015 requires it to be sent directly to you. Part 5: Grounds of Appeal [5.1] Ground 1:	[4.4] E	Email address:
[5.1] Ground 1:	inform you ho	n the Tribunal of this immediately and provide the Tribunal with the relevant details. ave a legal representative, all correspondence in relation to your appeal will be sent t
[5.2] Ground 2:	Part 5	: Grounds of Appeal
[5.2] Ground 2:	[5.1]	Ground 1:
[5.3] Ground 3:		
[5.3] Ground 3:		
[5.3] Ground 3:	[5.2]	Ground 2:
Note: Please state clearly and concisely the grounds on which you are seeking to appeal trecommendation of the International Protection Officer. An appeal is not valid unless it		
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recommendation of the International Protection Officer. An appeal is not valid unless it		
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• If you require more space, documentation should be listed on a separate sheet(s).

Part 6(A): Documentation received by the applicant from the International Protection Office/Minister

 Please list below all documents that accompanied the notification of recommendation issued to you by the International Protection Office/Minister.
[6A.1] Document 1:
[6A.2] Document 2:
[6A.3] Document 3:
• If you require more space, documentation should be listed on a separate sheet(s).
• NB: You may be required by the Tribunal to supply the documents listed at 6(A) above
Part 6(B): Additional Documentation to be considered in your appeal.
[6B.1] Document 1:
[6B.2] Document 2:
[6B.3] Document 3:
 Please list here all documents and/or records other than those listed at 6(A) above on which you propose to rely for the purposes of your appeal.
• If you require more space, documentation should be listed on a separate sheet(s).
• NB: The documents listed above at 6(B) must accompany this form.
Part 7: Oral Hearing (if applicable)
[7.1] Do you wish to have an oral hearing in connection with your appeal?
Yes: No: (tick as appropriate)
[7.2] If yes, do you require an interpreter? Yes: No: (tick as appropriate)
[7.3] If yes, please specify the precise language or dialect for which you require interpretation.

Part 8: Witnesses

Name of Witness(es)	Contact details	Language for Interpretation	Nature, purpose and relevance of the evidence

Note: You can request the Tribunal to direct the attendance of a witness before the Tribunal. Please supply the name, address and telephone number of any such persons. Please also state clearly the nature, purpose and relevance of the evidence proposed to be given by them.

Part 9: Application for Extension of Time (if applicable)

[9.1] Please set out the reasons why you were unable to lodge this appeal or	n time.

Note: If you are submitting this appeal outside of the time limits set out in the International Protection Act (Procedures and Periods for Appeals) Regulations 2017, you must apply for an extension of time within which to lodge your appeal.

Part 10: Authorisation and Confirmation of Applicant

[10.1] I confirm that the answers set out in	this form are true and correct.
Signed:	_ Applicant
Date:/	
[10.2] I authorise my legal representative to the Tribunal and to receive all corresponde	o act on my behalf in respect of all matters with nce and documents relating to my appeal.
Signed:	_ Applicant
Date:/	
Note: This part must be signed by the applic signed on their behalf by a parent/guardiar	cant. Where the applicant is a minor, it should be n.

Information note

- Please complete <u>all</u> sections of the attached form that apply to your appeal.
- Correspondence relating to your appeal will be sent to the address previously provided by you to the Minister for Justice unless an alternative address is provided in the attached appeal application form. If you have a legal representative, correspondence in relation to your appeal will be sent to them.
- Your application <u>must</u> specify the grounds upon which your appeal is to be based as provided for in section 41(2)(b) of the International Protection Act 2015.
- Any additional information on which you intend to rely must be submitted with your application (unless previously submitted to the International Protection Officer).
- All documents which you submit should be originals where possible.
- You may withdraw your appeal at any time before the making of a decision by the Tribunal by sending a notice of withdrawal to the Tribunal.
- Your application for appeal may be deemed withdrawn if you fail to attend a scheduled oral hearing or where you are deemed to have failed in your duty to cooperate as provided for in section 45 of the International Protection Act 2015.
- This form must be signed by the applicant. It cannot be signed by a legal representative on their behalf.

