



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 not be used where the recommendation includes findings under section 39(4) resulting in use of accelerated appeals procedures.

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: _____

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

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:

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 representative:

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

Part 4: Legal Representation (if applicable)

[4.1] Do you have legal representation? Yes: ☐ No: ☐ (tick as appropriate)

[4.2] Name and Address of your legal representative:

[4.3] Telephone number: _____

[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. If you have a legal representative, all correspondence in relation to your appeal will be sent to them unless the International Protection Act 2015 requires it to be sent directly to you.

Part 5: Grounds of Appeal

[5.1] Ground 1:

[5.2] Ground 2:

[5.3] Ground 3:

Note: Please state clearly and concisely the grounds on which you are seeking to appeal the recommendation of the International Protection Officer. An appeal is not valid unless it specifies in writing the grounds of appeal.

• *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 on time.

Note: If you are submitting this appeal outside of the time limits set out in the International Protection Act 2015 (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 act on my behalf in respect of all matters with the Tribunal and to receive all correspondence and documents relating to my appeal.

Signed: _____ Applicant

Date: ____ _

[10.3] I consent to the International Protection Appeals Tribunal emailing official communications in relation to my appeal to my email address, provided below:

Email address for electronic service and communication: _____

I understand it is my duty to inform the Tribunal if this email address changes.

I understand that official communications will include notifications and decisions and it is my responsibility to take any required action in response.

I understand that these communications may be signed with an electronic signature.

I understand that, where the Minister or International Protection Appeals Tribunal deems it necessary, notifications and decisions taken during the course of my appeal may be provided in electronic form to the legal representative whom I have authorised to act on my behalf.

I understand I am not obliged to receive communications electronically and that I may withdraw my consent at any time by contacting info@protectionappeals.ie.

Yes No (tick as appropriate)

Signed: _____

Date: _____

Note: This part must be signed by the applicant. Where the applicant is a minor, it should be signed on their behalf by a parent/guardian.

Information note

- Please complete all sections of the attached form that apply to your appeal.
- Correspondence relating to your appeal will be sent to the email 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 must 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.