



Sponsor's client ID no:	Sponsor's Date of birth: (yyyy/mm/dd)
Visa office:	Visa file no:
For IAD office use only	
IAD File No:	

Notice of Appeal - Sponsorship Appeal

Section 63(1) of the *Immigration and Refugee Protection Act*

TIME LIMIT: You must provide to the Immigration Appeal Division (IAD) this Notice of Appeal and a copy of the Citizenship and Immigration (CIC) refusal letter which contains the written reasons for refusal. The IAD Registry Office must **receive** these documents no later than **THIRTY (30) DAYS** after you received the refusal letter from CIC.

TO BE COMPLETED BY THE SPONSOR (APPELLANT):

I, _____, (appellant)
Family name
First and middle names

This appeals the refusal of the sponsored application for permanent resident visas made by the following persons:

Family name	First name and middle names	Relationship to me	Date of birth (yyyy/mm/dd)

Check the appropriate box:

I choose the language of my appeal to be: English French I need an interpreter at the proceeding: _____
Language, including any dialect, if applicable

My address is:

Address, number and street		Apt. #	City	Province	Postal code
Home telephone () Area code	Work telephone () Area code	Home Fax () Area code		Work Fax () Area code	

For IAD office use only
IAD File No:

COUNSEL:

You have the right to be represented by counsel, at your own expense. If you choose to retain counsel who charges a fee or other consideration, the counsel must be a member in good standing of either a provincial law society (including a lawyer or paralegal), the Chambre des notaires du Québec, or the Immigration Consultants of Canada Regulatory Council (ICCRC). If you have retained counsel, please complete the section below. If you will be retaining counsel later, you must provide to the IAD, in writing and without delay, the contact information for your counsel (name, address, telephone and fax numbers, any e-mail address, their membership identification number and the name of their organization).

Is your counsel receiving a fee or other consideration to represent you in this appeal? Yes No

I authorize the following person to be my counsel:

Given Name and Surname (Mr., Mrs., Ms., Me)		Occupation		Organization or Company	
Number and Street		Apt. #	City		Province
Postal Code		Telephone Number		Fax Number	
() _____ Area code		() _____ Area code		Electronic Mail Address	

Check one

<input type="checkbox"/> Lawyer / Paralegal / Notary: _____ Province
<input type="checkbox"/> Immigration Consultants of Canada Regulatory Council (ICCRC) Membership Identification Number: _____

IMPORTANT - CHANGE IN CONTACT INFORMATION FOR YOU OR YOUR COUNSEL:

You must notify the IAD, in writing and without delay, if the contact information for you or your counsel changes. Please direct all communication to the IAD Registry Office that serves the province or territory where you are residing (see attached instructions for addresses).

IMPORTANT: If you fail to appear for a hearing, or fail to communicate with the IAD when requested, or fail to provide information required by the IAD (such as your most recent address), the IAD may declare your appeal abandoned in accordance with subsection 168(1) of the *Immigration and Refugee Protection Act* without any further notice to you. If your appeal is abandoned, this means that your appeal has ended.

For Office Use Only
Received on:

I have attached a copy of the Citizenship and Immigration (CIC) refusal letter sent to the person I sponsored, which I received on:

_____ Date (yyyy/mm/dd)

_____ signed at _____ on _____
Appellant's signature City Date (yyyy/mm/dd)