1. List Names and Alien Numbers (A-Numbers) of all Respondents/Applicants.

WARNING: Names and A-Numbers for everyone appealing the Immigration Judge's decision must be written in item #1. The names and A-Numbers listed will be the only ones considered to be the subjects of the appeal.

2. I am ☐ the Respondent/Applicant ☐ DHS-ICE *(Mark only one box.)*

3. I am ☐ DETAINED ☐ NOT DETAINED *(Mark only one box).*

4. My last hearing was at: _____ *(Location, City, State)*

5. **What decision are you appealing?**

Mark only one box below. If you want to appeal more than one decision, you must use more than one Notice of Appeal (Form EOIR-26).

☐ I am filing an appeal from the Immigration Judge's decision *in **merits** proceedings* (example: removal, deportation, exclusion, asylum, etc.) dated _____

☐ I am filing an appeal from the Immigration Judge's decision *in **bond** proceedings* dated _____ (For DHS use only: Did DHS invoke the automatic stay provision before the Immigration Court? ☐ Yes ☐ No)

☐ I am filing an appeal from the Immigration Judge's decision ***denying a motion to reopen or a motion to reconsider*** dated _____

☐ I am filing an ***interlocutory appeal*** from the Immigration Judge's decision dated _____

(Please attach a copy of the Immigration Judge's decision that you are appealing.)

6. State in detail the reasons for this appeal. Please refer to the General Instructions at item F for further guidance. You are not limited to the space provided below; use more sheets of paper if necessary. Write your name(s) and A-Number(s) on every additional sheet.

(Attach additional sheets if necessary)

WARNING: Your appeal may be summarily dismissed. You must clearly explain the specific facts and law on which you base your appeal of the Immigration Judge's decision.

7. Do you desire oral argument before the Board of Immigration Appeals? ☐ Yes ☐ No

   WARNING: If you mark "Yes" in item #7, you should also include in your statement in item #6 why you believe your case warrants review by a three-member panel.

8. Do you intend to file a separate written brief or statement after filing this Notice of Appeal? ☐ Yes ☐ No

   WARNING: If you mark "Yes" in Item #8, you will be expected to file a written brief or statement if you receive a briefing schedule from the Board. The Board may summarily dismiss your appeal if you do not file a brief or statement within the time set in the briefing schedule.

9. Signature of Person Appealing (or attorney or representative):

   Print Name: _____

   Sign Here: _____

   Date: _____

10. Mailing Address of Respondents/Applicants:

Name:

Street Address:

Apartment or Room Number:

City, State, Zip Code:

Telephone Number:

NOTE: You must notify the Board within five (5) business days if you move to a new address or change your telephone number. You must use the Change of Address Form/Board of Immigration Appeals (Form EOIR-33/BIA).

11. Mailing Address of Attorney or Representative for the Respondents/Applicants:

Name:

Street Address:

Suite or Room Number:

City, State, Zip Code:

Telephone Number:

Email:

NOTE: If an attorney or representative signs this appeal for you, he or she must file *with this appeal*, a Notice of Entry of Appearance as Attorney or Representative Before the Board of Immigration Appeals (Form EOIR-27).

12. **PROOF OF SERVICE**
You must complete this section.

I

mailed or delivered a copy of this Notice of Appeal on

to

at

☐ No service needed. I electronically filed this document, and the opposing party is participating in ECAS. **Note: Electronic filers must still sign the "Proof of Service."**

SIGN HERE:

NOTE: If you are the Respondent or Applicant, the "Opposing Party" is the Assistant Chief Counsel of DHS – ICE.

WARNING: If you do not complete this section properly, your appeal will be rejected or dismissed. If you do not attach a fee payment receipt or a completed Fee Waiver Request (Form EOIR-26A) to this appeal, your appeal may be rejected or dismissed.

HAVE YOU?

- ☐ Read all of the General Instructions.
- ☐ Provided all of the requested information.
- ☐ Completed this form in English.
- ☐ Provided a certified English translation for all non-English attachments.
- ☐ Signed the form.
- ☐ Served a copy of this form and all attachments on the opposing party, if applicable.
- ☐ Completed and signed the Proof of Service.
- ☐ Attached the required fee payment receipt or Fee Waiver Request.
- ☐ Attached a completed and signed EOIR-27 for each respondent or applicant represented by an attorney or representative.