

WITNESS STATEMENT

(CJ Act 1967, s.9; MC Act 1980, ss.5A(3)(a) and 5B; MC Rules 1981, r.70)

Statement of URN:

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Age if under 18 (if over 18 insert 'over 18') Occupation:

This statement (consisting of: **3**..... pages each signed by me) is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated anything in it which I know to be false, or do not believe to be true.

Signature: Date:

Tick if witness evidence is visually recorded ☐ (supply witness details on rear)

I am an Officer employed by the UK Border Agency, and I currently work in a position I have held since In the normal course of my duties I have responsibility for updating and maintaining records with regards to a person's immigration status. As an Officer I have custody and control of Home Office Records and as such I am able to comment on records held by both departments. Records are compiled by Officers of the Home Office and the Border and Immigration Agency in the course of their duties from information supplied by persons who had personal knowledge of the matters dealt with in that information. The persons who supplied the information cannot be reasonably expected, having regard to the time that has elapsed since the information was supplied and to all the circumstances, to have any recollection of the matters dealt with in that information.

From records I can state that born on, a national, entered the United Kingdom on at On he/she submitted an application on behalf of him/herself (and his/her family) for leave to remain in the United Kingdom.

I refer to the following copy documents which I have made from documentation contained in a Home Office file (reference ABC1) relating to 's application to remain in the United Kingdom.

Signature: Signature witnessed by:

Continuation of Statement of

1. Screening Form Level 1 (Ref. ABC1/1) completed on at by Immigration staff from information provided by the final page of the form has been signed by him/her.

2. Statement of evidence form (Ref. ABC1/2), given to onto take away, complete and return. The document was received back by the Immigration Service on The declaration therein had been signed by on There was also attached a typed and signed witness statement from(the applicant), and a typed letter from the Refugee Legal Centre dated

3. On the application to remain in the United Kingdom was refused and a letter dated (Ref. ANC1/3) was sent by the Immigration Service to detailing the reasons for refusal.

4. On a Notice of Appeal (Ref. ABC1/4) was lodged.

5. On the Appeal was heard at Court before, Adjudicator. The Appeal was dismissed; the determination and reasons are produced (Ref ABC1/5).

6. On an Application for Permission to Appeal was refused, (Ref ABC1/6), and as from their case was considered as all appeal rights exhausted.

7. On representaions were received fromSolicitors acting for Letter dated from Solicitors (Ref. ABC1/7).

8. Onthe Solicitors acting for were informed that their representations had been considered, but the decision to refuse’s application was not going to be reversed. (Ref. ABC1/8).

9. Further representations were received from Solicitors in letters dated (Ref. ABC1/9) and(Ref. ABC1./10). The final representations were rejected in a letter (Ref. ABC1/11) served on and also his/her Solicitors on

Signature: Signature witnessed by:

Continuation of Statement of

.....

10. This individual has no basis to remain in the United Kingdom. In order to remove an individual from the United Kingdom, the Home Office must be in possession of a valid travel document for the country of which they are a national. If the individual does not hold a valid travel document, the Home Office will attempt to document the individual by completing certain application forms supplied by the travel document issuing authorities of the relevant country. The information required will include bio-data information obtained with the co-operation of the individual concerned. If the individual does not co-operate with the documentation process, section 35 of the Asylum and Immigration (Treatment of Claimants, etc) Act 2004, allows the Home Office to take certain actions to obtain a travel document to enable the individual to be removed from the United Kingdom.has not complied with the documentation process and the Home Office are therefore unable to obtain a travel document on which to remove him/her from the United Kingdom.

Signature: Signature witnessed by:

RESTRICTED – FOR POLICE AND PROSECUTION ONLY
(when completed)

Home address:
..... Postcode:
Home telephone number Work telephone number
Mobile/pager number Email address:
Preferred means of contact:
Male / Female (delete as applicable) Date and place of birth:
Former name: Height: Ethnicity Code:
Dates of witness non-availability:
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Witness care

- a) Is the witness willing and likely to attend court? Yes / No. If 'No', include reason(s) on MG6. What can be done to ensure attendance?
- b) Does the witness require 'special measures' as a vulnerable or intimidated witness? Yes / No. If 'Yes' submit MG2 with file.
- c) Does the witness have any specific care needs? Yes / No. If 'Yes' what are they? (Healthcare, childcare, transport, disability, language difficulties, visually impaired, restricted mobility or other concerns?)

Witness Consent (for witness completion)

- | | | | | | |
|---|-----|--------------------------|----|--------------------------|------------------------------|
| a) The criminal justice process and Victim Personal Statement scheme (victims only) has been explained to me | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| b) I have been given the leaflet 'Giving a witness statement to police — what happens next?' | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | |
| c) I consent to police having access to my medical records in relation to this matter: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A <input type="checkbox"/> |
| d) I consent to my medical record in relation to this matter being disclosed to the defence: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A <input type="checkbox"/> |
| e) I consent to the statement being disclosed for the purposes of civil proceedings e.g. child care proceedings (if applicable) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | N/A <input type="checkbox"/> |
| f) The information recorded above will be disclosed to the Witness Service so they can offer help and support, unless you ask them not to. Tick this box to decline their services: | | | | | <input type="checkbox"/> |

Signature of witness:

Statement taken by (print name):

Station:

Time and place statement taken:

Signature of witness: