

PRINCIPALITY OF ZAKISTAN - MINISTRY OF INTERIOR
DEPARTMENT OF BORDER CONTROL AND MIGRATION SERVICES
RIGHT TO APPEAL FORM FOR VISA REFUSAL

Personal Details of the Applicant:

- **Full Name:**
- **Date of Birth:**
- **Nationality:**
- **Passport Number:**
- **Contact Details (Email & Phone):**

Details of Visa Refusal:

- **Visa Application Number:**
- **Date of Refusal Notification:**
- **Type of Visa Applied For:** [Tourist/Work/Student/Other]
- **Refusal Reason(s) Cited:**

Grounds for Appeal:

1. **Reason for Appeal (Explain why you believe the refusal was unjustified):**

2. **Supporting Documents (Please attach relevant documents that support your appeal):**

- [Document 1] :
- [Document 2] :
- [Document 3] :

Requested Outcome:

- **Please indicate what outcome you are seeking (e.g., visa approval, reassessment, additional interview):**
[State the desired outcome clearly and concisely.]

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Signature and Declaration:

By signing below, I confirm that the information provided in this appeal is true and accurate to the best of my knowledge. I understand that submitting false information may result in the dismissal of my appeal.

- **Applicant's Signature:** _____
- **Date of Submission:**

Instructions for Submission:

1. This form must be submitted within 30 days from the date of the visa refusal notice.
2. Please send this completed form along with supporting documents to the following address:
Department of migration services
Principality of Zakistan, Oakpolis City, 1241
Alternatively, you may submit your appeal via email at: diplomacyzakistan@gmail.com
3. The processing time for appeals is approximately 15 working days. You will be notified of the decision in writing.

Important: The decision of the appeals committee is final. In case of a second refusal, no further appeals will be considered.