

CHILDREN'S COURT OF WESTERN AUSTRALIA

APPLICATION Protection and Care of Children <i>Children & Community Services Act 2004</i>
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File No:
Filed at:
Filed on:

CHILD	Full Name:
	Date of Birth: Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
	Ethnicity: <input type="checkbox"/> Aboriginal <input type="checkbox"/> Other (please specify) _____ <input type="checkbox"/> Unknown

APPLICANT DETAILS <small>TICK ONE BOX ONLY</small>	Full Name:
	<input type="checkbox"/> DCPFS <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Child Representative <input type="checkbox"/> Other _____ [state relationship to child]
	Address for service: _____
	Phone: _____ Fax: _____ Email: _____

RESPONDENT(S) DETAILS	First Respondent	Full Name:
		Relationship to child:
	Second Respondent	Full Name:
		Relationship to child:
	Third Respondent	Full Name:
		Relationship to child:

CHILD REPRESENTATIVE	Lawyer: _____ Firm's name: _____
	Address: _____

APPLICATION TYPE <small>TICK ONE BOX ONLY</small>	<input type="checkbox"/> Warrant (Access) <input type="checkbox"/> Warrant (Apprehend) <input type="checkbox"/> Warrant (Provisional Protection and Care)
	<input type="checkbox"/> Protection Order (supervision) <input type="checkbox"/> Protection Order (time-limited) <input type="checkbox"/> Protection Order (until 18)
	<input type="checkbox"/> Protection Order (special guardianship)
	Existing Protection Order: <input type="checkbox"/> Extend <input type="checkbox"/> Vary <input type="checkbox"/> Revoke <input type="checkbox"/> Revoke and Replace <input type="checkbox"/> Interim order <input type="checkbox"/> Secure Care <input type="checkbox"/> Other _____

<small>[COURT USE ONLY]</small> COURT DETAILS <small>WHEN AND WHERE THE APPLICATION WILL BE BEFORE THE COURT</small>	Court date: / /20 am/pm	<i>[Seal of the Court]</i>
	Court location:	
	Address:	
	Phone: _____ Fax: _____	

SIGNED	Applicant/Applicant's Lawyer Date.....
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If you fail to attend or notify the Court, orders may be made in your absence

GROUNDS FOR APPLICATION

Form with 6 horizontal dashed lines for writing.

ORDERS SOUGHT:-

Form with 20 horizontal dashed lines for writing.