

**APPLICATION FOR FEE WAIVER AND
AFFIDAVIT OF FINANCIAL CIRCUMSTANCES**

IN THE CHILDREN'S COURT
OF VICTORIA AT _____

Court Reference: _____

Case details

Case name: _____
Hearing type: _____
Hearing date(s): _____

Applicant details

Name: _____
Occupation: _____
Name of employer: _____
Gross weekly wage: _____

Weekly expenses

Rent/board:	\$ _____
Rates/electricity/gas:	\$ _____
Food expenses:	\$ _____
Phones (home/mobile):	\$ _____
Travel (fuel, public transport fares):	\$ _____
Medication/medical costs:	\$ _____
Child support/maintenance:	\$ _____
Loan repayments:	\$ _____
Total weekly expenses	\$ _____

Reasons for request

I apply for a fee waiver for the following reasons:

Affidavit

The contents of this affidavit are true and correct and I make it knowing that a person making a false affidavit may be prosecuted for the offence of perjury.

*Sworn/*Affirmed at [*place*]

in the State of Victoria on [*date*]

[*Signed by person*]

Before

[*Signature*]

[*Name, capacity and address in legible writing, typing or stamp*]

Authorised under section 19(1) of the *Oaths and Affirmations Act 2018* to take an affidavit.