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| CHILDREN, YOUTH AND FAMILIES (CHILDREN’S COURT FAMILY DIVISION) RULES 2017 |
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| FORM 3 |
|  |
| Rule 6 |
| **APPLICATION TO VARY OR REVOKE A TEMPORARY ASSESSMENT ORDER MADE WITHOUT NOTICE** |
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| **Children, Youth and Families Act 2005** |
| Section 235 |
|  |
|  | Court Reference: |       |
|  |
| Name of Child: |        |
| Gender: |       |  | Date of Birth: |       |
|  |
| **Details of the order that is sought to be varied or revoked** |
|  |
| On the application of: |       |
| Agency and address: |       |
| The Children’s Court at [*venue*]  |       | on [*date*]  |
|       | made a temporary assessment order under section 229 of  |
| the Act. |
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| **Details of this application**  |
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| The application is: |
| \*to vary the order. |
| \*to revoke the order. |
|  |
| The grounds for this application are [*set out grounds*]: |
|       |
| This application is made: |
| \*by the child |
| \*by a parent of the child |
|  |
| Applicant’s name: |       |
| Applicant’s email: |       |
| Agency [*if applicable*]:  |       |
| Applicant’s [*or agency*] address:  |       |
| Applicant’s phone: |       |  |
|  |
| Application filed by— |
| \*Legal Representative |
| Name: |       |
| Email: |       |
| Agency/Firm: |       |
| Address: |       |
| Phone: |       |  |
| \*Applicant |
|  |
| Date: |       |  |
| Signature: |       |
|  |
| **Notice to the parties** |
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| **To the \*Secretary/\*principal officer:** | You must come to the hearing of this application. |
| **To the child:** | If you are the applicant, you must come to the hearing of this application. If you are not the applicant, you are not required to come to the hearing of this application unless you wish to do so. |
| **To the parent(s):** | If you are the applicant, you must come to the hearing of this application. If you are not the applicant, you should still come to the hearing of this application. If you do not attend, the Court may proceed to hear and determine the application in your absence. |

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| **Details of the hearing** |
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| A hearing of this application will be held at the Children’s Court as follows: |
| Date: |       | Time: |       |  |
| Place: |       |
|  |
|  |
| Issued at [*place*]: |       |  |
| Date of issue: |       |  |
|  |
|  |       |
|  | Registrar |
|  |
| \*Delete if not applicable |