

CHILDREN'S COURT of WESTERN AUSTRALIA

**APPLICATION***Mandatory Testing (Infectious Diseases) Act 2014  
Part 3, Division 2- Disease Test Orders*

Court number	
Childrens Court at	PERTH
Date lodged	

<b>Public Officer</b>	Name	
	Address	

<b>Details of Suspected Transferor</b> <i>(a Protected Person)(PP)</i>	Full Name	
	Address	
<b>Details of Third Party</b> <i>(the Responsible Person)(RP)</i>	Name	
	Address	

<b>Type of Application</b>	<input type="checkbox"/> Section 16 - New order	<input type="checkbox"/> Section 19(4) - Vary or Revoke order
	<b>Applicant to Vary or Revoke:</b> <input type="checkbox"/> Public Officer <input type="checkbox"/> Third Party	
<b>Grounds for Application</b>		
	<i>(attach separate page if insufficient space)</i>	

<b>Signature of applicant or lawyer</b>	Applicant / Applicant's lawyer	<b>Date</b>	
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<b>HEARING DETAILS</b>			
<b>This application will be heard on:</b>			
<b>Date</b>		<b>Time</b>	
<b>Place</b>	Children's Court, 160 Pier Street, PERTH WA 6000		

<b>Service details for new order (s16) applications</b>	On <i>(date)</i> _____, I served a copy of this application personally on the third party named above.
	Place of Service <i>(address)</i> :
	Name of server:
	Address of server:
	Signature: _____ Date: _____

**RECORD OF COURT PROCEEDINGS**

Date	Appearances		Counsel		Judicial officer
	PP	RP			
	Y/N	Y/N			
	Y/N	Y/N			
	Y/N	Y/N			
	Y/N	Y/N			
<b>Order(s)</b>					
	<b>Judicial Officer</b>			<b>Date</b>	