

Children's Court of Western Australia

Application initiating care proceedings¹

Protection and Care of Children
Children & Community Services Act 2004

File number:

Filed at:

Filed on:

Child	Full name:
	Date of birth:
	Ethnicity: <input type="checkbox"/> Aboriginal <input type="checkbox"/> Unknown <input type="checkbox"/> Other (please specify) _____

Applicant details	Full name:
	Tick one box only. <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Proposed special guardian <input type="checkbox"/> Other [state relationship to child] _____
	Address for service:
	Phone:
	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	Existing Protection Order: Tick one box only. <input type="checkbox"/> Vary <input type="checkbox"/> Revoke
	<input type="checkbox"/> Special guardianship application by carer <input type="checkbox"/> Other (state application type) _____

¹ By a party other than the Department of Communities

Grounds for application

Orders sought

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

[Court use Only] Court Details When and where the application will be before the court.	Court date: / /20	am/pm	[Seal of the Court]
	Court location:		
	Address:		
	Phone:	Fax:	