|  |
| --- |
| **APPLICATION FOR COSTS ORDER** |
|  |
|  | Court Reference: |       |
|  |
| Name of Child: |       |
| Gender: |       |  | Date of Birth: |       |
| Address: |       |
|  |
| **Details of this application** |
|  |
| This application is for costs against [*name of party*]  |
|       |
| in favour of the applicant.  |
|  |
| **This application is made by:** |
| \*the child |
| \*a parent of the child  |
| \*the Secretary |
| \*the principal officer of an Aboriginal agency |
| \*Independent Child Lawyer  |
| \*Other  |       |  |
|  |
| Costs sought  | $      |  |
| Grounds for application: |
|       |
|  |
| 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 parties** |
|  |
| You are entitled to attend the hearing of this application. If you do not attend, the Court may proceed to hear and determine the application in your absence. |
|  |
| **Details of the hearing** |
|  |
| 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  |