

CUSTODY ATTENDANCE FORM

Form A

IN THE CHILDREN'S COURT
OF VICTORIA AT _____

Case Number: _____

LEGAL REPRESENTATIVE TO COMPLETE

Name of Child: _____

Date of hearing: _____

Date of birth: _____

Location: Parkville Cherry Creek Other _____

Subsequent listing dates: No Yes – Date & listing type: _____

Is the matter part heard? No Yes – before whom: _____

Have you obtained updated instructions for this hearing? No Yes – Date instructions obtained: _____

Are you requesting a waiver for this hearing? No – Please advise how you intend the matter to proceed on the listing date e.g. Plea of guilty: _____ Yes – Please advise reasons for the waiver request e.g. Brief not yet received: _____

*Please note all waiver requests must be approved by a judicial officer prior to having the child sign the waiver.

LEGAL REPRESENTATIVE DETAILS

Name: _____

Firm: _____

Email: _____

OFFICE USE ONLY - JUDICIAL OFFICER TO COMPLETE

Request for Waiver: Granted- Is the attendance of the legal representative required? Yes No Refused

Additional directions: _____

e.g. If unsuitable for waiver, is it suitable for AVL? _____

Judicial Officer's Signature