**ORDER – BRING DETAINEE OR LICENSEE FROM AN INSTITUTION**

[*SUPREME/DISTRICT/MAGISTRATES/YOUTH/ENVIRONMENT RESOURCES AND DEVELOPMENT*] **Select one** COURT OF SOUTH AUSTRALIA

CRIMINAL JURISDICTION

**[*FULL NAME*]**

**Applicant**

**v**

**[*FULL NAME*]**

**Respondent**

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| **Particulars of Detainee/Licensee** | | | | |
| Detainee/Licensee |  | | | |
| **Full Name** | | | |
| Date of birth |  | | | |
| **Date of Birth (if known)** | | | |
| Name of institution |  | | | |
| **Name** | | | |
| Address of institution |  | | | |
| **Street Address (including unit or level number and name of property if required)** | | | |
|  |  |  |  |
| **City/town/suburb** | **State** | **Postcode** | **Country** |
|  | | | |
| **Email address** | | | |
| Telephone |  | | | |
| **Type (eg. Home; work; mobile) - Number** | | | |

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| **Introduction**  **Hearing**  Hearing Location: [*suburb*]  [*Hearing date*] [*Listed starting time*]  Hearing type:  **Supreme and District Court only**  [*Actual hearing start time*] - [*Actual hearing end time*]  [*Presiding Officer*]  **Appearances**  [*Applicant Appearance Information*]  [*Respondent Appearance Information*]  **Remarks**   * (a) An application for [*release on licence/review of licence/variation of licence*] has been filed in the Court. The [*detainee/licensee*] now [*in detention/on license*] in the said location [*full name*] (‘the Subject’) is required to attend at the hearing detailed above in which the [*detainee/licensee*] is a party for the purposes of the *Criminal Law Consolidation Act 1935.* |

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| **Order**  **Date of Order**: [*date*]  **Terms of Order**  It is ordered that:  **Orders in separately numbered paragraphs.**   * 1. pursuant to Part 8A of the *Criminal Law Consolidation Act* 1935, the Subject attend at the Court [*in person/by video link*] at the date, time and location set out above. |

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| **To the [*Manager or the Institution at [institution]*] [*Clinical Director, Forensic Mental Health Services at James Nash House*] [*Clinical Director, Extended Care Service at the Glenside Campus of the Royal Adelaide Hospital*] [*Director of the Mental Health Unit at the [hospital]*]**  **And to the Sheriff and the Commissioner of Police for the State of South Australia and each member of the Police Force for the State**  YOU ARE DIRECTED to arrange the Subject’s attendance at the hearing [*in person/by video link*]. |

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| **Authentication**  …………………………………………  Signature of Court Officer  [*title and name*] |