**INFORMATION FOR ARRAIGNMENT ON COMMITTAL FOR SENTENCE**

[*SUPREME/DISTRICT*] **Select one** COURT OF SOUTH AUSTRALIA

CRIMINAL JURISDICTION

**R**

**v**

**[*FULL NAME*]**

**Defendant**

|  |  |  |
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| **Lodging party** |  |  |
|  | **Party title** | **Full Name of party** |
| Name of law firm/office |  |  |
| **If applicable** | **Law firm/office** | **Responsible Solicitor** |
| Name of authorised officer |  |
| **If body corporate and no law firm/office** | **Full Name** |

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| **Hearing details**Date of arraignment: [*date*]The facts in this matter are * disputed.
* not disputed.
* The Defendant will be [*tendering/requesting*] **Select one** [*name of* *type of report*] **provision for multiple reports** in relation to this matter. The estimated arrival date of the [*last*] report is [*date*].

Any other cases in the Court or another Court that the Defendant requests be heard concurrently: [*case number*] **provision for multiple**Estimated time for defence submissions: [*number of*] minutes.Counsel who is intended to appear at the hearing is [*name*] [*phone no*] [*email address*] **if solicitor is intended to appear, include solicitor details here*** An interpreter is required for the hearing in the following language: [*language and dialect*]
* Special arrangements for the hearing, namely [*arrangements requested eg hearing loop*] because [*brief reasons*]
* The Defendant requests to appear by audiovisual link from [*name of institution*] because [*brief reasons*]
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| **Service**The party filing this document is required to serve it on all other parties in accordance with the Rules of Court. |