**WARRANT OF INTERIM DETENTION – UNCONTROLLED SEXUAL INSTINCTS**

SUPREMECOURT OF SOUTH AUSTRALIA

SPECIAL STATUTORY JURISDICTION

**[*FULL NAME*]**

**Applicant**

**[*FULL NAME*]**

**Respondent**

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| **Person subject to warrant** | | | | | |
| Respondent |  | | | | |
| **Full Name** | | | | |
| Address |  | | | | |
| **Street Address (including unit or level number and name of property if required)** | | | | |
|  |  |  | |  |
| **City/town/suburb** | **State** | **Postcode** | | **Country** |
|  | | | | |
| **Email address** | | | | |
| Date of Birth and Licence number |  | | |  | |
| **Date of Birth** | | | **Driver’s Licence No** | |
| Phone Details |  | | |  | |
| **Type (eg. home; work; mobile) – Number** | | | **Another number** | |

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| **To the Sheriff and to the Commissioner of Police for the State of South Australia and members of the Police Force and to the Chief Executive of the Department [*for Correctional Services/of Human Services, Youth Justice*]**  **Introduction**  An Application has been brought by the Attorney-General for the Respondent to be dealt with under section 57 of the *Sentencing Act 2017* and to be detained in custody until further order.  The Court is satisfied that:   * the Court on [*date*] directed that at least two legally qualified medical practitioners (nominated by a prescribed authority) inquire into the mental condition of the Respondent and report to the Court on whether the person is incapable of controlling, or unwilling to control, their sexual instincts. * an interim detention order pursuant to section 57(5) of the *Sentencing Act 2017* is appropriate.   **Warrant**  YOU, the Sherriff, and you, the Commissioner of Police and Members of the Police Force, are directed to convey the Respondent to a *[Correctional Services Institution/Training Centre].*  YOU, the Chief Executive of the Department *[for Correctional Services/of Human Services, Youth Justice]* are directed to detain the Respondent in custody pending the determination of the proceeding. |

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