**WARRANT OF INTERIM DETENTION – HIGH RISK OFFENDERS**

**Criminal Law (High Risk Offenders) Act 2015**

SUPREMECOURT OF SOUTH AUSTRALIA

SPECIAL STATUTORY JURISDICTION

**[*FULL NAME*]**

**Applicant**

**[*FULL NAME*]**

**Respondent**

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| 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/Licence no |  |  |
| **Date of Birth** | **Licence no (if any)** |
| Phone Details |  |  |
| **Type (eg. home; work; mobile) – Number** | **Another number** |

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| **To the Sheriff, the Commissioner of Police for the State of South Australia and each member of the Police Force for the State, and the Chief Executive of the Department for Correctional Services or Department of Human Services, Youth Justice****Recitals**1. An application for a Continuing Detention Order in relation to the Respondent has been made pursuant to section 18 of the *Criminal Law (High Risk Offenders) Act 2015*.
2. The Court has ordered that the Respondent be detained in custody pending the determination of the proceeding.
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| **Warrant**1. The Sheriff, the Commissioner of Police, and members of the police force are directed to take the Respondent to a Correctional Services Institution.
2. The Chief Executive of the Department for Correctional Services or Department of Human Services, Youth Justice is directed to detain the Respondent until the application for a Continuing Detention Order is determined.
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| **Authentication**…………………………………………Signature of Court Officer[*title and name*]Date warrant signed: [*date*] |