Form YTO5

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| **To be inserted by Court** |  |
| Case Number: Date Filed:FDN: |  |

**ORDER [YOUTH TREATMENT ORDER OR VARY/REVOKE ORDER]**

**Controlled Substances Act 1984 – Part 7A**

YOUTHCOURT OF SOUTH AUSTRALIA

GENERAL JURISDICTION

IN THE MATTER OF

Please specify the Full Name for each party. Each party should include a party number is more than one party of the same type.

Applicant 1

**Only displayed if applicable**

Applicant 2

Child

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| **FINAL ORDERS:****Assessment Order Particulars:** [ ]  It is ordered that:1. The abovenamed child *[Name]* attend the assessment service *[Name]* (‘the Service’) and participate in the assessment at *[time]* and for a period of *[period]*; and
2. The assessment service *[Name]* provide a report to the Applicant, the child (or person representing the child) and the Court within 5 business day of the child’s assessment.

[ ]  [*Outline other requirements specified in the order – section 54B(1)(a)(i)*][ ]  [*Other orders– If applicable*]:[ ]  The following consequential or ancillary orders are made: **List Orders in separately numbered paragraphs:****Treatment Order Particulars:** [ ]  It is ordered that:1. The abovenamed child *[Name]* attend the treatment service [N*ame*] (‘the Service’) and participate in the treatment by attending *[number]* sessions for a period of *[period]*; and
2. The treatment service *[Name]* provide a report to the Applicant, the child (or person representing the child) and the Court within 5 business days of the conclusion of the child’s ~~t~~reatment.

[ ]  [*Outline other requirements specified in the order –section 54B(b)(i)]*[ ]  [*Other orders– If applicable*]:[ ]  The following consequential or ancillary orders are made: **List Orders in separately numbered paragraphs:****Detention Order Particulars:** [ ]  It is ordered that:1. The abovenamed child *[Name]* be detained at [*Name of facility*] from [*specify start to end date*] for the purpose of ensuring compliance with an Assessment Order or Treatment Order
2. Adjourned for review on X, then for reviewing every X until finalisation of the order.
3. The assessment service *[name]* and Kurlana Tapa provide a Detention Order Review Report to the applicant, the child, and the Court at least 5 business days before the next date for the review.

[ ]  [*Outline other requirements specified in the order – section 54B(1)(c)*][ ]  [*Other orders– If applicable*]:[ ]  The following consequential or ancillary orders are made: **List Orders in separately numbered paragraphs:****Vary/Revoke Order Particulars:** [ ]  It is ordered that:  [ ]  1. The Order made on [*date*] is varied in the following way [*outline details*].  [ ]  2. The Order made on [*date*] is not revoked.[*outline details*]. [ ]  3. [*Other – If applicable*]**Costs Order Particulars:** [*outline details*] |

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| **To the [*nominated Assessment Service/nominated Treatment Service*] & [*Department of Human Services*]**The Court has ordered that the abovenamed Child be subject to: [ ]  Assessment Order [ ]  Treatment Order (to expire DATE) |

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| **To the [*Chief Executive of the Attorney General’s Department*]** The Court has ordered that the abovenamed Child be subject to: [ ]  Detention Order  |

**Only displayed if variation or revocation made:**

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| **To the [*Chief Executive of the Attorney General’s Department*], [*nominated Assessment Service/nominated Treatment Service*] and [*Department of Human Services*]**The Court has made the following variation/revocation of the Order made on [*date*] in relation to the abovenamed Child:**Details of revocation:** |

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| **Accompanying Documents**Accompanying this Order:* Statement of rights outlining the relevant legal and other rights of the child in relation to the order.
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| **Authentication****Court use only**…………………………………………Signature of RegistrarDate Order sealed: |