

REQUEST TO RE-LIST
Local Court Criminal and Youth Justice
Pursuant to Practice Direction 6.2

Court Location:	
Court File Number/s:	
Defendant:	Lawyer with carriage:
Prosecuted by:	Lawyer with carriage:
Application made by:	Of Agency/Firm:
Matter is next listed in Court: / / 20 for(eg plea/hearing etc)	
Contact Details: (How will the Court notify you of the outcome)	
Reason for Application to Re-List: (Additional documentation may be required)	
Re-list time/date/location sought: / /20 at am/pm, in	
<p>Does the matter need to be relisted urgently? YES / NO</p> <p>This application to have your matter re-listed will be decided by a Registrar or Judge in Chambers. As a general rule, matters will be scheduled not less than 24 hours later. If you need this matter listed more urgently than that, please select that the matter is urgent above and provide detail as to why.</p> <p>If yes, why is it urgent?</p>	
<p>Have you notified all other parties of this application? YES / NO</p> <p>It is your responsibility to ensure that the other parties to the matter are advised of the outcome of this application. If you are unrepresented and unsure of how to do this, you should ask the Registrar for assistance.</p>	
Contacted..... on behalf of prosecution/defence	
On / / 20 atam/pm Consents / Opposes / Not Known	

Is the Defendant in Custody: Yes <input type="checkbox"/> No <input type="checkbox"/>
Is a Call up Notice Required: Yes <input type="checkbox"/> No <input type="checkbox"/>
Is a Video Link Required: Yes <input type="checkbox"/> No <input type="checkbox"/>
Filed by: _____ of: _____
Signed: _____ Date: _____

COURT USE ONLY			
Application to re-list:	GRANTED <input type="checkbox"/> REFUSED <input type="checkbox"/>		
Confirm next court date:	/ /20 at am /pm		
Confirm next court location:			
Are any dates vacated?	No <input type="checkbox"/> Yes <input type="checkbox"/> : / /20		
Before (if applicable)	Judge _____		
Defendants appearance	Excused if legally represented <input type="checkbox"/> Required <input type="checkbox"/>		
Call up notice required:	No <input type="checkbox"/> Yes <input type="checkbox"/>		
AVL required:	No <input type="checkbox"/> Yes <input type="checkbox"/> From _____ To _____		
Notes:			
Signed:	Date:		
REGISTRY USE ONLY			
Parties notified <input type="checkbox"/>	Call-up/AVL produced <input type="checkbox"/>	IJIS Updated <input type="checkbox"/>	Officer:
Signed:		Date:	