Magistrates’ Court Practice Direction No. 9 of 2020

**Form D**

**APPLICATION FOR DIVERSION HEARING ON THE PAPERS**

|  |  |  |  |
| --- | --- | --- | --- |
| In the Magistrates' Court of Victoria at [*venue*] |       | Court Ref: |       |
| Informant: |       |
| Accused: |       |
| Date matter is currently listed: |  |

|  |  |
| --- | --- |
| [ ]  | The Accused is not legally represented |
| [ ]  | The Accused is represented by: |       |
|  |  |  |
| Does the Accused consent to the Diversion proceeding on the papers? | [ ]  Yes | [ ]  No |
| Does the Prosecution consent to the Diversion proceeding on the papers? | [ ]  Yes | [ ]  No |
| Has the victim been consulted? (If yes, victim response must be provided) | [ ]  Yes | [ ]  No |

|  |
| --- |
| **OFFENCES** |
| Are there co-offenders? | [ ]  Yes [ ]  No  |
| If yes, names of co-offenders: |       |
| Is the matter family violence related? | [ ]  Yes [ ]  No  |
| Is there a current intervention order? | [ ]  Yes [ ]  No (If yes, copies to be attached) |

**Charges to proceed in diversion hearing, with agreed amendments (if any) and maximum penalties (copies to be attached):**

**Charges** **to be withdrawn (if any):**

|  |  |
| --- | --- |
| **DOCUMENTS ATTACHED** |  **YES** |
| Completed and signed Diversion notice  | [ ]  |
| Completed Diversion questionnaire | [ ]  |
| Copy of charge(s) upon which Diversion is sought with agreed amendments (if any) | [ ]  |
| Charges to be withdrawn if matter proceeds to Diversion | [ ]  |
| Agreed summary of facts | [ ]  |
| Victim impact statement (if any) | [ ]  |
| Agreed criminal history (if any) | [ ]  |
| Outline of Defence submissions (dot point form) | [ ]  |
| Outline of Prosecution submissions or materials (if any, dot point form) | [ ]  |
| Any mitigatory materials upon which Defence rely |  | [ ]  |
| Current intervention orders (if any) |  | [ ]  |
| Ancillary Orders (if any) |  | [ ]  |

 **REQUEST FOR DIVERSION HEARING ON THE PAPERS**

|  |
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|  |
| *Signature of legal practitioner of Accused OR Accused* |

 DATE:

 Name of legal practitioner or Accused:

 Email:

 Telephone:

|  |
| --- |
|  |
| *Signature of Prosecutor* |

 DATE:

 Name of Prosecutor:

 Email:

 Telephone: