

**Form P**  
**REQUEST FOR PLEA OF GUILTY AND SENTENCE 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 plea and sentence proceeding on the papers?  Yes  No

**OFFENCES**

Are there co-offenders?  Yes  No

If yes, names and sentence details of  
co-offenders (if any):

Is it a summary offence(s)?  Yes  No  
(If no, this Practice Direction cannot be utilised)

Is the matter family violence related?  Yes  No

Is there a current intervention order?  Yes  No (If yes, copies to be attached)

**OTHER MATTERS**

Is the accused in custody in relation to these matters?  Yes  No  
(If yes, please refer to Practice Direction No. 5)

Agreed pre-sentence detention:

Are there any mandatory orders that apply?  Yes  No

If yes to the above, please outline:

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

**Charges to be withdrawn (if any):**

**ANCILLARY ORDERS SOUGHT**

	<b>YES</b>	<b>NO</b>	<b>CONSENT?</b>		<b>YES</b>	<b>NO</b>	<b>CONSENT?</b>
Restitution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compensation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forfeiture/Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Forensic Procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify and attach)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Licence order	<input type="checkbox"/>	<input type="checkbox"/>	

**DOCUMENTS ATTACHED**

**YES**

- Copy of charge(s) in relation to which Accused pleads guilty with agreed amendments (if any)
- List of charges to be withdrawn (if any)
- Agreed summary
- Agreed criminal history (if any)
- Victim impact statement (if any)
- Copy of ancillary orders sought
- Outline of Defence submissions (dot point form)
- Outline of Prosecution submissions (if any, dot point form)
- Any references or reports upon which Defence rely

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**REQUEST FOR PLEA OF GUILTY AND SENTENCE ON THE PAPERS**

*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: