

Section 11 of the
Children and Young Persons Act 2001

IN THE COURT OF SUMMARY JURISDICTION
OF THE ISLE OF MAN

For Court use only

HB /

Date issued:

APPLICATION FOR AN ORDER

Between

	Applicant
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and

	Respondent
--	------------

and

	<i>(Any other parties)</i>
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To enable your application to be processed, please ensure you complete all grey sections. Failure to do so may result in your application being rejected. If completing in handwriting and further space is required, continuation sheets are available from the Isle of Man Courts of Justice Public Counter and the website, <http://www.courts.im>.

1. About you (the person completing this from, known as 'the Applicant'). State:

- your title, full name, address, telephone numbers (mobile and landline), date of birth and relationship to each child above*
- your advocate's name, address, reference, telephone number and fax number*

Full details about you

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2. The child(ren) and Order(s) you are applying for. For each child, state:

- full name, date of birth, place of birth and sex
- the type of Order you are applying for (for example, Residence Order, Contact Order, Prohibited Steps Order, Specific Issue Order)

3. Your reason(s) for applying and any plans for the child(ren). State briefly:

- your reasons for applying and what you want the court to Order, and if appropriate you should include when you last saw your child(ren) if you are seeking to suspend contact why
- what harm will come to your child(ren) if contact is resumed or suspended

4. Other cases which concern the child(ren). Have there ever been, or there are pending, any court cases which concern: (tick as applicable)

- a child whose name you have put in paragraph 2 YES NO
- a full or half brother or sister of a child whose name you have put in paragraph 2 YES NO
- a person in this case who is or has been involved in caring for a child whose name you have put in paragraph 2 YES NO

If the answer to any/all of the above questions is a 'YES' then attach a copy of the relevant Order and give:

- the name of the court
- the name and contact address (if known) of the guardian ad litem, if appointed
- the name and contact address (if known) of the court welfare officer, if appointed
- the name and contact address of the advocate appointed for the child(ren)

5. The respondent(s). For *each* respondent, state:

- *the title, full name and address*
- *the date of birth (if known) or the age*
- *the relationship to each child*

6. Others to whom notice is to be given. For *each* person, state:

- *the title, full name and address*
- *the date of birth (if known) or the age*
- *the relationship to each child*

7. The care of the child(ren). For *each* child in paragraph 2, state:

- *the child's current address and how long the child has lived there*
- *whether it is the child's usual address and who cares for the child there*
- *the child's relationship to the other children (if any)*

8. Social Services. For each child in paragraph 2, state:

- whether the child is known to Social Services. If yes, give name of social worker
- whether the child is, or has been, on the Child Protection Register. If yes, give the date of registration

9. The education and health of the child(ren). For each child, state:

- the name of the school, college or place of training which the child attends
- whether the child is in good health. Give details of any serious disabilities or ill health
- whether the child has any special needs

10. The parents of the child(ren). For each child, state:

- the full name of the child's parents
- whether the parents are, or have been, married to each other or civil partners to each other
- whether the parents live together. If yes, where.
- whether, to your knowledge, either of the parents have been involved in a court case concerning a child. If yes, give the date and name of the court.

11. The family of the child(ren). *For any other child not already mentioned in the family (for example, a brother or half sister), state:*

<ul style="list-style-type: none">• <i>the full name and address</i>• <i>the date of birth (if known) or age</i>• <i>the relationship of the child to you</i>

12. Other adults. *State:*

<ul style="list-style-type: none">• <i>the full name of any other adults (for example, lodgers) who live at the same address as any child named in paragraph 2</i>• <i>whether they live there all the time</i>• <i>whether, to your knowledge, the adult has been involved in a court case concerning a child. If yes, give the date and name of the court.</i>

13. Risk. *If you believe that any of the children named in paragraph 2 have suffered, or are at risk of suffering, any harm from:*

<ul style="list-style-type: none">• <i>any form of domestic abuse</i>• <i>violence within the household</i>• <i>child abduction</i>• <i>other conduct or behaviour by any person who has contact with the child</i> <p><i>give a <u>brief</u> summary. You will be asked to give further details if the Court thinks it is relevant to the issues the Court has to decide.</i></p> <p><i>Note – "harm" includes damage suffered from seeing or hearing the ill treatment of another</i></p>

14. Mediation. *State:*

- *whether you have used family mediation to attempt to agree arrangements for your child(ren)*
- *brief details about the outcome of the family mediation*
- *If you did not use mediation, explain why*

15. At the court. *State:*

- *whether you will need an interpreter at court (parties are responsible for providing their own). If yes, specify the language.*
- *whether disabled facilities will be needed in court*

Signed	Date
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(Applicant)

(Advocate for applicant)

IN THE COURT OF SUMMARY JURISDICTION
OF THE ISLE OF MAN

Case number: HB/

Notice of Proceedings

Hearing Directions Appointment

<i>name of applicant</i>	has applied to the Court for an Order
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The application concerns the following child(ren)

<p><i>For each child, state:</i></p> <ul style="list-style-type: none"> • <i>full name</i> • <i>date of birth</i>

About the **Hearing** **Directions Appointment**

You should attend when the Court hears the application at Isle of Man Courts of Justice, Deemsters Walk, Douglas, Isle of Man

On (date)	
At (time)	a.m. / p.m.
The hearing is estimated to last	hours/minutes

What to do next

There is a copy of the application with this Notice. You have been named as a party in the application. Read the application now and the notes overleaf.

When you go to Court please take this Notice with you and show it to a court official.

About this Notice

Note 1	At the hearing or directions appointment	You will be able to tell the Court about any special needs or circumstances of the child(ren)
Note 2	If Form HBC7 (Acknowledgement) is enclosed	You must fill it in and return it to the court as soon as possible, and serve a copy on the other parties
Note 3	For legal advice	Go to an advocate. The Public Office at the Isle of Man Courts of Justice can provide you with a list of practising advocates. Names and addresses of advocates can be obtained from the Yellow Pages of the Isle of Man Telephone Directory. An advocate will be able to tell you whether you may be eligible for legal aid or you may contact the Legal Aid Office at the Isle of Man Courts of Justice. (Telephone: (01624) 685977)

IN THE COURT OF SUMMARY JURISDICTION
OF THE ISLE OF MAN

ACKNOWLEDGEMENT

Between

	Applicant
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and

	Respondent
--	------------

and

	<i>(Any other parties)</i>
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	<i>date of hearing</i>
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What you (the person receiving this form) should do:-

Answer the following questions

If you need more space for an answer use a continuation sheet of paper. Please put your full name, case number and the child(ren)'s date(s) of birth at the top

When you have answered the questions make copies of all pages of this form. You will need a copy for the Applicant and each party named in Part 5 and Part 6 if applicable of the Form HBC1.

Post or hand a copy to the Applicant and each party. Then post or take this form to the Court at the address below. You should do this within 14 days of the date you were given the Notice of Proceedings or the postmark of the envelope if the Notice of Proceedings was posted to you.

Summary Courts
Isle of Man Courts of Justice
Deemsters Walk
Douglas
Isle of Man
IM1 3AR

The Court office is open from:
9.30am to 4.30pm on Monday to Thursday; and
9.30am to 4.00pm on Friday.

Telephone: +44 (0) 1624 685471
email: summary.courts@courts.im

1. About you (the Respondent)

State:

- your title, full name, address, telephone numbers (mobile and landline), date of birth and relationship to each child above
- your advocate's name, address, reference, telephone number and fax number

Full details about you (and your advocate if applicable)

2. Full address and postcode to which correspondence and other papers should be sent

3. The application was received on

4. Do you oppose the application? YES NO

5. Do you intend to apply to the Court for an Order? YES NO

6. Will you require an interpreter at Court? YES NO

(if you require an interpreter you must bring your own). If so please specify language:-

Signed	Date
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(Applicant)

(Advocate for Applicant)

(Respondent)

(Advocate for Respondent)