

Trial Plan

Filed in the Family Court of Western Australia

Full name: _____

MARK X IN THE BOX THAT APPLIES TO YOU

- Husband/father
 Wife/mother
 Other

File number _____

Court location 150 Terrace Road, Perth

Court date _____

Part A About the parties

APPLICANT 1

Family name as used now

Given names

RESPONDENT 1

Family name as used now

Given names

What is the contact address (address for service) in Australia for the party filing this document?

You do not have to give your residential address. You may give another address at which you are satisfied that you will receive documents. If you give a lawyer's address, include the name of the law firm.

		State	Postcode
Phone (08)			
Lawyer's code			
Email*			

* Please do not include email or fax addresses unless you are willing to receive documents from the Court and other parties in that way.

Part B About the independent children's lawyer (if appointed)

Independent children's lawyer family name

Given names

--	--

Firm name

	EIC/ opening	XXM	XXM	Re XM
(in minutes)				
APPLICANT		OP	ICL	
Opening address				
Applicant				
Witness				
Witness				
Closing address				
SUBTOTAL	0.00	0.00	0.00	0.00
Total of Applicant's Case	0.00	Minutes		
	0.00	Hours and Minutes		

RESPONDENT		OP	ICL	
Opening address				
Respondent				
Witness				
Witness				
Closing address				
SUBTOTAL	0.00	0.00	0.00	0.00
Total of Respondent's Case	0.00	Minutes		

ICL		App	Resp	
Opening address				
Single Expert Witness				
Witness				
Closing address				
SUBTOTAL	0.00	0.00	0.00	0.00
Total of ICL's Case	0.00	Minutes		

Housekeeping at start of trial	0.00	Minutes
	0.00	Hours and Minutes
Total Time for Trial	0.00	Minutes
	0.00	Hours and Minutes

Estimated Hearing Time	0.00	Days
------------------------	------	------

Key

EIC	Evidence in Chief
XXM	Cross Examination
Re XM	Re Examination
OP	Other Party
ICL	Independent Children's Lawyer

Dated _____

Applicant/Respondent/Other/ICL _____