**APPLICATION FOR WITNESS ORDER – TO ATTEND**

**COURT OF CRIMINAL APPEAL**

**CCA Form 14 (version 1)**

**SC (CCA) Rules 4.3(2) and 4.3(3)**

[Note: This Form must be filed with a draft Witness Order to Attend]

|  |  |  |
| --- | --- | --- |
| **COURT REFERENCE NUMBER(S)** | | |
| Court reference number(s) | | [Include all Justicelink and proceeding numbers for each offence appealed] |
| **PARTIES** | | |
| Applicant |  | |
| Respondent |  | |
| **WITNESS** | | |
| [For each witness, specify the name of the witness and explain why the witness is sought to attend and be examined; indicate if the witness and the respondent are aware of the application, and their attitude to the application] | | |
| **LEGAL REPRESENTATION** | | |
| Does the Applicant have legal representation for this application? | | [ ] YES [complete legal representative details below]  [ ] NO – I am representing myself  Gaol:  OR  Postal and email address [only required if not in custody] |
| **Legal representative:** | |  |
| 1. Name of firm | |  |
| 1. Contact name | |  |
| 1. Case reference no. | |  |
| 1. Address | |  |
| 1. Email address | |  |
| 1. Phone | |  |
| **SIGNATURE** | | |
| Signature of legal representative (or Applicant if the Applicant has no legal representative) | |  |
| Name | |  |
| Capacity  [e.g., Appellant’s legal representative] | |  |
| Date of signing | |  |
| **REGISTRY DETAILS** | | |
| Street address | | Supreme Court of New South Wales  Court of Criminal Appeal  Law Courts Building  Queen's Square  Level 5, 184 Phillip Street  Sydney NSW 2000 |
| Postal address | | GPO Box 3  Sydney NSW 2001 |
| DX address | | DX 829 SYDNEY |
| Filing email address | | [sc.emailfiling@justice.nsw.gov.au](mailto:sc.emailfiling@justice.nsw.gov.au); and [cca@justice.nsw.gov.au](mailto:cca@justice.nsw.gov.au)  [Note: this Form may be filed by email (Practice Note No. SC CCA 1)] |
| Phone | | 1300 679 272 |