

Form Number 12 (version 1)
 Queensland Civil and Administrative Tribunal Act 2009 (section 33)

Application for miscellaneous matters – *Guardianship and Administration Act 2000*

For office use only	
Case number:	
Client number:	
Date:	
Registry:	
Sent to:	

Applicants to complete:

Who is the application about? *(the tribunal refers to this person as “the adult”)*

<i>Adult’s given name/s</i>	<i>Surname/Family name</i>

Who is filling out this form? *(the tribunal will refer to you as “the applicant”)*

<i>Applicant’s given name/s</i>	<i>Surname/Family name</i>

Your relationship to the adult?

What are you applying for? *(you may tick more than one box)*

<input type="checkbox"/> recognition of an order made under another law	<input type="checkbox"/> adult evidence order
<input type="checkbox"/> advice, directions or recommendations	<input type="checkbox"/> closure order
<input type="checkbox"/> authorisation of a conflict transaction	<input type="checkbox"/> an order concerning the validity of an enduring document
<input type="checkbox"/> ratification of a decision by an informal decision-maker	<input type="checkbox"/> leave to withdraw as administrator or guardian
<input type="checkbox"/> confidentiality order	<input type="checkbox"/> leave to resign as attorney
<input type="checkbox"/> non-publication order	<input type="checkbox"/> to be joined as an active party

IMPORTANT

Please read each page carefully before completing the application:

- a) Attachments required are identified with the symbol “▶”
- b) You may not need to make this application
- c) If you do not understand terms used in this form, please refer to the glossary at the end.

Confidentiality

The principles of natural justice and procedural fairness require that parties be aware of all material upon which the tribunal will base its decision. Active parties are entitled to inspect the application and other documents directly relevant to an issue in the proceeding before the tribunal unless a confidentiality order has been made prohibiting or restricting access.

Each of the following persons is an active party:

- a) the adult
- b) if the adult is not the applicant – the applicant
- c) if the proceeding is for the appointment or the reappointment of a guardian, administrator or attorney for the adult – the person proposed for appointment or reappointment
- d) any current guardian, administrator or attorney for the adult
- e) the adult guardian
- f) the public trustee
- g) a person joined as a party to the proceeding by the tribunal.

In some proceedings the active parties might also include:

- h) the Chief Executive of Department of Communities
- i) the Director of Mental Health
- j) a service provider providing a disability service to the adult.

The tribunal can remove the right to inspect a document only by a confidentiality order. A confidentiality order will only be made if the tribunal is satisfied that it is necessary to avoid serious harm or injustice to a person.

THE ADULT

1. Who is the application about? *(the tribunal refers to this person as "the adult")*

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Title</i>	<i>Given name/s</i>	<i>Surname/Family name</i>

Has the tribunal had an application about this adult in the past?

No/unknown Yes

If yes, please provide the tribunal's reference number, if known:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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What other names is the adult known by?

Sex

Male Female

What is the adult's marital status?

What is the adult's date of birth?

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
<i>Day</i>		<i>Month</i>		<i>Year</i>

Place of birth

What is the adult's usual permanent address?

Organisation *(if applicable)*

Full postal address

<input type="text"/>
<input type="text"/> Postcode <input type="text"/>

Telephone

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Daytime phone</i>	<i>Mobile phone</i>	<i>After hours number (if different)</i>

Fax

Email

What type of accommodation is this?

(hostel, own home, rental property)

What are the adult's current contact details? (if different from above, e.g. hospital, respite)

Organisation (if applicable)

Full postal address

<input type="text"/>	
<input type="text"/>	Postcode <input type="text"/>

Telephone

Daytime phone

Mobile phone

After hours number (if different)

Fax

Email

What language(s) does the adult speak at home?

What is the adult's cultural background?

Would the adult require an English interpreter at the tribunal hearing?

Yes No

Have you informed the adult about this application?

Yes – how did the adult respond?
(please describe briefly)

No – why not? (please explain briefly)

<input type="text"/>
<input type="text"/>
<input type="text"/>

In some cases, the tribunal will expect the adult to attend the hearing.

Who would be accompanying the adult to the hearing? (contact details **must** be provided)

Title

Given name/s

Surname/Family name

Telephone

Daytime phone

Mobile phone

After hours number (if different)

Will the adult require any special assistance for the hearing?

wheelchair/mobility access

for speech impairment

for hearing impairment/loss

for vision impairment/loss

other

Please attach a photocopy of a document to substantiate the adult’s identity
(► e.g. passport, driver’s licence, pension card, Medicare card).

The tribunal retains discretion to establish identity to its satisfaction. The tribunal may ask for additional evidence to substantiate the adult’s identity. In accordance with the provisions of section 249 of the *Guardianship and Administration Act 2000* information collected under this part will remain confidential.

DECISION-MAKING CAPACITY

2. What is the cause of the adult’s impaired capacity?
(provide specific details in the space below)

- acquired brain injury or cognitive disability (as a result of accident, illness or other causes)
- dementia (mental confusion due to a condition such as Alzheimer’s disease, senility or some other degenerative disease)
- intellectual disability (a condition that has affected the person since birth or early childhood)
- psychiatric disability/mental illness (a diagnosed condition such as schizophrenia or bi-polar affective disorder)
- other (any other condition that reduces the ability to make decisions about personal or financial matters) (please specify)

WHO IS THE ADMINISTRATOR OF THE ADULT?

An administrator is a person appointed by a court or a tribunal to make financial/legal decisions for the adult.

3. Tick one of the following:

- there is no administrator
- there is an application with the tribunal to appoint an administrator
- the following people have been appointed as administrator

Photocopy this page as many times as you need to or provide the same information on a separate sheet of paper.

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Title</i>	<i>Given name/s</i>	<i>Surname/Family name</i>

Address

<input type="text"/>	<input type="text"/>
<input type="text"/>	Postcode <input type="text"/>

Telephone	() <input type="text"/>	<input type="text"/>	() <input type="text"/>
	<i>Daytime phone</i>	<i>Mobile phone</i>	<i>After hours number (if different)</i>

Fax	() <input type="text"/>
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Email	<input type="text"/>
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Relationship to adult:	<input type="text"/>
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Who appointed them?	<input type="text"/>
----------------------------	----------------------

When were they appointed?	<input type="text"/>
----------------------------------	----------------------

In which state/country were they appointed?	<input type="text"/>
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What is their attitude to this application?	<input type="checkbox"/> support	<input type="checkbox"/> do not support	<input type="checkbox"/> unsure
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WHO IS THE GUARDIAN OF THE ADULT?

A guardian is a person appointed by a court or a tribunal to make personal/health decisions for the adult.

4. Tick one of the following:

- there is no guardian
- there is an application with the tribunal to appoint a guardian
- the following people have been appointed as guardian

Photocopy this page as many times as you need to or provide the same information on a separate sheet of paper.

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Title</i>	<i>Given name/s</i>	<i>Surname/Family name</i>

Address

<input type="text"/>	<input type="text"/>
<input type="text"/>	Postcode <input type="text"/>

Telephone	() <input type="text"/>	<input type="text"/>	() <input type="text"/>
	<i>Daytime phone</i>	<i>Mobile phone</i>	<i>After hours number (if different)</i>

Fax	() <input type="text"/>
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Email	<input type="text"/>
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Relationship to adult:	<input type="text"/>
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Who appointed them?	<input type="text"/>
----------------------------	----------------------

When were they appointed?	<input type="text"/>
----------------------------------	----------------------

In which state/country were they appointed?	<input type="text"/>
--	----------------------

What is their attitude to this application?	<input type="checkbox"/> support	<input type="checkbox"/> do not support	<input type="checkbox"/> unsure
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WHO IS THE ATTORNEY OF THE ADULT?

An attorney is a person appointed by the adult under an *enduring power of attorney*.

5. Tick one of the following:

- there is no attorney
- there is an application with the tribunal concerning the attorney/s
- the following people are attorneys for the adult. *Attach a copy of the enduring power of attorney if it has not already been provided to the tribunal.*

Photocopy this page as many times as you need to or provide the same information on a separate sheet of paper.

Title Given name/s Surname/Family name

Address

Postcode

Telephone

() ()
Daytime phone Mobile phone After hours number (if different)

Fax

()

Email

Relationship to adult:

Who appointed them?

When were they appointed?

In which state/country were they appointed?

What decisions are they appointed for?

health personal financial

What is their attitude to this application?

support disapprove unsure

ADULT'S PRIMARY CONTACTS

You must not withhold information from the tribunal about the names of people who may have an interest in this application.

6. Tick one of the following:

- there is nobody who may be interested in the application (*e.g. siblings, children, service providers, advocates, etc*)
- the following people may have an interest in this application (*include people already mentioned in this application*)

Photocopy this page as many times as you need to or provide the same information on a separate sheet of paper.

Title Given name/s Surname/Family name

Address

Postcode

Telephone

() ()
Daytime phone Mobile phone After hours number (if different)

Fax

()

Email

Relationship to adult:

Tick one of the following:

- I have spoken to this person and they agree with this application.
- I believe they will agree to this application but I have not been able to speak with them.
- I have spoken to this person and they do not agree with this application.
- I believe they will not agree to this application but I have not been able to speak to them.

WHAT ARE YOU SEEKING FROM THE TRIBUNAL?

Recognition of an order made under another law

If you need to have an order that was made in another state or under a foreign jurisdiction recognised so it is effective in Queensland, an application can be lodged with the tribunal. The tribunal may recognise the order as long as it is similar to an order that may be made under Queensland's *Guardianship and Administration Act 2000* or the *Powers of Attorney Act 1998*. If you are unsure about this please contact the tribunal registry.

You must:

- complete questions 7 and 8. *Please include details about possible addresses and dates and whether the adult will be living in Queensland permanently.*
- attach report/s completed by medical, psychiatric or other professionals giving details of the adult's impaired decision-making capacity
- attach a copy of the original order certified by the originating court or tribunal that you want recognised in Queensland and any other relevant material which the originating court or tribunal relied upon in making its decision
- attach copies of any relevant forms, e.g. enduring power of attorney, advance health directive
- sign at the end of this application (see the heading "sign and date here")

Advice, directions or recommendations

At the directions hearing the tribunal can give directions to guardians, administrators or attorneys on various issues. Parties may be required to attend directions hearings.

You must:

- complete questions 7 and 8
- sign at the end of this application (see the heading "sign and date here")

Authorisation of a conflict transaction

A conflict transaction is a transaction where there may be conflict or which results in conflict between the duty of the administrator/attorney towards the adult and the interests or another duty of the administrator/attorney. A typical conflict transaction would be the purchase or sale of an adult's asset to family or friends.

Approval to enter into conflict transactions may be authorised by the tribunal. The tribunal may authorise one specific transaction, conflict transaction of a specific type or conflict transactions generally.

You must:

- complete questions 7 and 8
- attach copies of any relevant forms
- sign at the end of this application (see the heading "sign and date here")

Ratification of a decision made by an informal decision-maker

The tribunal may ratify a decision or a proposed decision of an informal decision maker for an adult except when it is a special personal matter, a health matter or a special health matter.

You must:

- complete questions 7 and 8
- sign at the end of this application (see the heading "sign and date here")

WHAT ARE YOU SEEKING FROM THE TRIBUNAL? *(continued)*

Confidentiality order

A confidentiality order allows the tribunal to withhold from an active party or other person a document, part of a document or other information that is before the tribunal. The tribunal may make a confidentiality order only if the tribunal is satisfied it is necessary to avoid serious harm or injustice to a person. Note that if the document or other information contains health information about a person, then 'serious harm' to a person includes 'significant health detriment' to the person. If a confidentiality order is made before the hearing the order is automatically vacated at the start of the hearing. If the applicant for the confidentiality order wishes to apply for a further confidentiality order over the relevant document or information they will need to advise the tribunal at the commencement of the hearing.

You must:

- complete questions 7 and 8
- sign at the end of this application (see the heading "sign and date here")

Non-publication order

A non-publication order allows the tribunal to prohibit publication of information about a tribunal proceeding. The tribunal may make a non-publication order only if it is satisfied it is necessary to avoid serious harm or injustice to a person. Note that if the information to be published contains health information about a person, 'serious harm' to a person, then includes 'significant health detriment' to the person. If a non-publication order is made before the hearing the order is automatically vacated at the start of the hearing. If the applicant for the non-publication order wishes to apply for a further non-publication order over the relevant information they will need to advise the tribunal at the commencement of the hearing.

You must:

- complete questions 7 and 8
- sign at the end of this application (see the heading "sign and date here")

Adult evidence order

An adult evidence order allows the tribunal to obtain relevant information from the adult without anyone else being present in the hearing room. The tribunal may make an adult evidence order only if the tribunal is satisfied it is necessary to avoid serious harm or injustice to a person or to obtain relevant information the tribunal would not otherwise receive. If the relevant information is health information about a person 'serious harm to a person' includes 'significant health detriment to the person'.

You must:

- complete questions 7 and 8
- sign at the end of this application (see the heading "sign and date here")

Closure order

A closure order allows the tribunal to close a hearing or part of a hearing to all or some members of the public or a particular person, including an active party. The tribunal may make a closure order only if the tribunal is satisfied it is necessary to avoid serious harm or injustice to a person. If the hearing or part of the hearing concerns health information about a person 'serious harm to a person' includes 'significant health detriment to the person'.

You must:

- complete questions 7 and 8
- sign at the end of this application (see the heading "sign and date here")

WHAT ARE YOU SEEKING FROM THE TRIBUNAL? *(continued)*

An order concerning the validity of an enduring document

An enduring document is an *enduring power of attorney* or an *advance health directive*.

What is your opinion about the existing enduring document?

- the enduring document is valid
- the principal who made the enduring document did not have capacity to do so. *Please do not complete this form. You require a different form called an Application for a declaration about capacity.*
- the document has been incorrectly signed by the principal
- the document has been incorrectly witnessed
- the acceptance of the attorney's appointment has been incorrectly executed
- the document has been incorrectly executed in some other way *(give details)*

What order would you like the tribunal to make?

- note the existence of a valid enduring document
- declare an enduring power of attorney for personal matters invalid
- declare an enduring power of attorney for health matters invalid
- declare an enduring power of attorney for financial matters invalid
- vary the enduring document in some other way *(give details)*

You must:

- complete questions 7 and 8 *(more detailed information about the above two questions may be included in your reply to question 8)*
- attach copies of all **known current and former enduring documents** (e.g. enduring power of attorney, advance health directive) or provide details of whether the tribunal can obtain them
- sign at the end of this application (see the heading "sign and date here")

WHAT ARE YOU SEEKING FROM THE TRIBUNAL? *(continued)*

Leave to withdraw as guardian

Leave to withdraw as administrator

The person filling out this form is also responsible for obtaining an updated *Report by Medical and Related Health Professionals* for the tribunal. **Note: The tribunal may be unable to have a hearing without this report.**

A copy of the form to be used for the current report is available:

- on the internet at www.qcat.qld.gov.au and selecting "Publications"
- by calling the tribunal on 1300 753 228

The *Report by Medical and Related Health Professionals* should be completed by a health professional including a social worker, psychologist, psychiatrist, Director of Nursing, geriatrician, or general practitioner and should NOT be completed by the person filling out this application. If necessary, the health professional may send the form directly to the QCAT registry after you have submitted your application. Should you have other comprehensive and current medical information about the adult's decision-making capacity (e.g. ACAT assessments), please telephone the QCAT registry prior to the submission of the application.

Why are you seeking leave to withdraw? *(you may tick more than one box)*

- the adult has regained capacity. *Then you must complete a different form. You must apply for a declaration of capacity.*
- informal arrangements are working satisfactorily *(no. report on capacity required)*
- there is conflict between decision-makers *(please complete question 8)*
- for personal/health reasons I am unable to continue *(please complete question 8)*
- there is already a guardianship/administration application lodged
- a guardianship/administration application will be submitted by: *(please give details)*

Title

Given name/s

Surname/Family name

Telephone

Daytime phone

Mobile phone

After hours number (if different)

You must:

- complete questions 7 and 8
- attach a report/s completed by medical, psychiatric or other professionals giving details of the adult's impaired decision-making capacity
- sign at the end of this application (see the heading "sign and date here")

WHAT ARE YOU SEEKING FROM THE TRIBUNAL? *(continued)*

Leave to resign as attorney

The person filling out this form is responsible for also obtaining for the tribunal an updated *Report by Medical and Related Health Professionals*. **Note: The tribunal may be unable to have a hearing without this report.**

A copy of the form to be used for the current report is available:

- on the internet at www.qcat.qld.gov.au and selecting "Publications"
- by calling the tribunal on 1300 753 228

This report should be completed by a health professional including a social worker, psychologist, psychiatrist, Director of Nursing, geriatrician, or general practitioner and should NOT be completed by the person filling out this application. If necessary, the health professional may send the form directly to the registry after you have submitted your application. Should you have other comprehensive and current medical information about the adult's decision-making capacity (e.g. ACAT assessments), please telephone the registry prior to the submission of the application.

Why are you seeking leave to resign?

- there is conflict between decision-makers *(please complete question 8)*
- for personal/health reasons I am unable to continue *(please complete question 8)*
- there is already a guardianship/administration application lodged
- a guardianship/administration application will be submitted by: *(please give details)*

Title Given name/s Surname/Family name

Telephone
Daytime phone Mobile phone After hours number (if different)

You must:

- complete questions 7 and 8
- attach a copy of the *enduring power of attorney*
- attach (a) report/s completed by medical, psychiatric or other professionals giving details of the adult's impaired decision-making capacity
- attach a statement of the adult's current financial position
- sign at the end of this application (see the heading "sign and date here")

WHAT ARE YOU SEEKING FROM THE TRIBUNAL? *(continued)*

To be joined as an active party

The adult, the applicant, any current guardian, administrator or attorney for the adult and any person proposed as a guardian, administrator or attorney is automatically an active party. Anyone else must apply to be considered as an active party and the tribunal will make a decision whether to include a person as an active party. Active parties may present their case at a hearing, inspect documents, seek leave to be represented and be given a copy of the tribunal's decision and any written reasons for them.

You must:

- complete questions 7 and 8
- attach copies of any relevant forms, e.g. *enduring power of attorney, advance health directive, medical or other professional reports or financial statements*
- sign at the end of this application (see the heading "sign and date here")

PRIORITY

7. Is this application urgent? *That is, do the matters detailed in this application pose an immediate problem for the adult and his/her quality of life?*

- No
- Yes *(please explain being as specific as possible)*

WHY ARE YOU SEEKING THIS ORDER?

8. Clearly explain your reasons for seeking the order

THE APPLICANT

9. Applicant's contact details *(If you are filling out this form you are the applicant)*

Applicant's name

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Title</i>	<i>Given name/s</i>	<i>Surname/Family name</i>

Organisation *(if applicable)*

Full postal address

<input type="text"/>	<input type="text"/>
<input type="text"/>	Postcode <input type="text"/>

Street address *(if different)*

<input type="text"/>	<input type="text"/>
<input type="text"/>	Postcode <input type="text"/>

Telephone

<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Daytime phone</i>	<i>Mobile phone</i>	<i>After hours number (if different)</i>

Fax

Email

Your relationship to the adult?

How long have you known the adult?

What you need to know

- you are expected to bear your own costs in attending the hearing *(by telephone if necessary)*
- the tribunal will notify you if you are expected to make arrangements for the adult to attend the hearing
- you are expected to notify the tribunal if the adult moves, passes away or if there is a change in the adult's decision-making capacity
- you may seek to withdraw this application in writing *(stating your reasons)* but the tribunal may proceed if it sees fit

Warning

Section 216 of the *Queensland Civil and Administrative Tribunal Act 2009* makes it an offence for a person to knowingly give the registry documents containing false or misleading information.

Maximum penalty for such an offence – \$10,000.

SIGN AND DATE HERE

The information in this application is true to the best of my knowledge.

Applicant/s sign here

Date

If more than one applicant is named all must sign the application.

LODGEMENT DETAILS

Deliver to:	Mail to:	Fax to:	Email to:
Queensland Civil and Administrative Tribunal Floor 9, 259 Queen Street Brisbane Qld 4000 or at any local Magistrates Court	Queensland Civil and Administrative Tribunal GPO Box 1639 Brisbane Qld 4001	(07) 3221 9156	applications@qcat.qld.gov.au

GLOSSARY OF TERMS

active party: any of the following: the adult, the applicant, attorney, any current or proposed guardian and/or administrator; the Adult Guardian, the public trustee and any person joined as a party by the tribunal.

administrator: someone appointed under the *Guardianship and Administration Act 2000* to manage the financial affairs of a person with impaired decision-making capacity.

Adult Guardian: an independent statutory officer who is appointed to protect the rights and interests of adults with impaired decision-making capacity.

advance health directive: a legal document, under the *Powers of Attorney Act 1998*, that states the adult's wishes or directions regarding the adult's future health care for various medical conditions. It comes into effect only if the adult is unable to make their own decisions.

capacity: an adult is deemed to have capacity if they are capable of understanding the nature and effect of the decisions they are making and can freely and voluntarily make those decisions and can communicate those decisions in some way.

enduring power of attorney: a formal agreement giving someone else the power to make decisions on behalf of the adult even when they lose capacity.

guardian: someone appointed under the *Guardianship and Administration Act 2000* to make some or all personal and lifestyle decisions for an adult with impaired decision-making capacity.

order: a tribunal order advises the decision of the tribunal members. Each order is tailored to meet the needs of the adult in the least restrictive way.