



Record of Hearing - Bail Application

Reference Number

OPEN THE COURT

Take charge: introduce yourself state why you are there and how you will conduct hearing

Date / / 20__ Location _____ Time Start ____ : ____ Time Finish ____ : ____

- Charges received Stated why I have been called Explained how the hearing will be conducted
 Stated name & office Explained what bail is Confirmed accused has copy of the charges

PARTICIPANT DETAILS

note who is present and reason for attendance

Accused full name _____ Date of Birth / /
 Current address _____ Age _____ Years
 _____ Time at address _____ Years _____ Months
 Surname others present _____ Status _____ Marital status _____

 Informant _____ Rank _____ Number _____
 Corroborator _____ Rank _____ Number _____

POLICE CASE

a brief summary of why the accused is before the Court (You are deciding Bail not the charges)

Charges _____ On oath Yes No
 _____ Bail opposed
 Police reasons for opposing bail _____ Indictable
 _____ Signed charges
 Police case _____ Interview _____ Reverse onus 4(2) 4(4)
 Strong Average Weak Full Partial No comment

ACCUSED SUMMARY

summarise situation and note response

Summarise the situation to ensure understanding and what is required in response. Do not allow discussion of charges/case or admissions. Only circumstances relating to assessment for Bail. Note opposite any mitigating circumstances or relevant detail in risk assessment for or against granting bail from responses and conversation with accused.

PERSONAL DETAILS

observations and personal circumstance that may assist decision making

Occupation _____ Living details _____
 Employed Yes No How long _____
 Dependents Yes No Number _____
 Benefit Yes No Type _____

PRESENTMENT

current observations and history

Health _____ Failed to Appear x _____ Previous Nil 1 - 5 5 - 15 15+
 Disability _____ Criminal History Type _____
 Demeanour _____

DECISION

reasons under the Act for decision and welfare enquiries if remanded in Custody

Remand date / / In Custody On Bail If Remanded in Custody: ASK and circle response to
 Court Magistrates Unacceptable risk Own undertaking Need medical treatment Y N N/A
 Children's Continue offending Reporting Need prescription medication Y N N/A
 County Danger to witness Residence Have any welfare concern Y N N/A
 Location _____ Seriousness of offence Deposit \$ _____ Surety \$ _____
 Reverse onus Special (record special conditions on notes page)

