



Communication Assistance

APPLICATION FORM

Section 80 of the Evidence Act 2006

When to use this form

Fill in this form if you are defence counsel (for a defendant or defence witness), the officer in charge/prosecutor (for a prosecution witness), or counsel for a participant in the family/civil jurisdiction and you want a judge to approve a communication assistance assessment.

Complete this form electronically and email it to the court for filing or submit a paper copy to the court.

SECTION 1: Case information

Section 1 is to be completed by the person making the application (for example lawyer).

Name of person making application: [Redacted]

Role: [Redacted]

Phone Number: [Redacted]

Case number: [Redacted]

Location of court: [Redacted]

Case name: [Redacted]

Court type: [Redacted]

Date assessment report required: [Redacted]

Date of next hearing (if applicable): [Redacted]

Date of trial (if known): [Redacted]

Expected length of trial (if known): [Redacted]

Agreed mode of evidence at trial (if any): [Redacted]

Has a fitness assessment also been requested or completed recently? Yes No

Brief description of charge(s)/case (do not include substantive information about the case):

[Redacted]

Name of participant: [Redacted]

Date of birth: [Redacted]

Ethnicity: [Redacted]

If other ethnicity, please specify: [Redacted]

Language(s) spoken/understood: [Redacted]

Interpreter required

Participant type (tick one): Defendant Defence witness Prosecution witness Other: [Redacted]

Residing Town/City: [Redacted]

In private home

Residential facility

In custody

Reason for application

Select as many that apply

Child aged 12 years and under

Learning/ Intellectual disability

Autism (includes Asperger's syndrome)

Brain injury/ neurological impairment (for example stroke)

Dyslexia

Foetal Alcohol Spectrum Disorder

Attention Deficit Hyperactivity Disorder

Mental distress, dementia, mental health condition or trauma induced anxiety or stress that impacts communication

Has a hearing impairment or is deaf

Has a visual impairment or is blind

Recent psychiatrists' or psychologists' report, including a Fitness to Plead Report or a Mode of Evidence Report indicates communication difficulties, intellectual disability, poor processing speed, high suggestibility or high stress

Comprehension flags

Does not appear to understand questions or is confused by what is happening

Is unable to repeat back what is being said in their own words or follow instructions

Focuses on irrelevant small points rather than important issues or expresses strange ideas

Does not understand common everyday expressions

Appears very eager to please/ says "yes" quickly and frequently without seeming to understand

Expression flags

Gives vague, un-detailed responses to questions or is off the topic

Repeats what was said to them (or parts of what was said)

Forgets or contradicts their previous accounts

Takes a long time to respond, frequently reformulates their sentences

Reason for application

Select as many that apply

Talks tangentially or is off the topic

Talks too much or not enough – uses short, simple sentences or rambles

Has no speech or limited speech or is difficult to understand

Uses signs and gestures to communicate or augmentative (low or high technology) methods to communicate

Behavioural flags

Does not make eye contact, appears disengaged or physically withdrawn, covers head, eyes or ears with hands or clothing, or fidgets

Gives inappropriate or unusual emotional responses such as smiling, laughing, humour or cockiness

Appears to have a short attention span or is easily distracted or restless when listening

Says they do not remember or “I don’t know” a lot or repeatedly changes the subject

Is sensitive to light and noise, including background noise, lots of activity and people

Is easily frustrated, very defensive, verbally or physically aggressive or appears over-excited/exuberant

Literacy flags

Does not read or write well

Other

Other suspected or known conditions, please specify:

Supporting information

Please attach previous reports or summarise the participant’s communication abilities:

Please note any topics/ people/ places that should not be mentioned for the participant’s wellbeing or any potential safety risks for the assessor:

Note: Once the person making this application has completed this section, submit it to the court as part of the notice of application or oral application.

SECTION 2: Contact details of professionals involved in case

Section 2 is to be completed by Court Registry staff only.

Professionals involved	Name	Email	Phone
Case manager			
Prosecutor			
Officer in Charge			
Defence Counsel			
Youth Advocate			
Youth Justice Coordinator or social worker			
Applicant's lawyer			
Respondant's lawyer			
Lay advocate			
Lawyer for child			
Other			
Communication assistance provider:			
Referral Date:			
RC Code:			
GL Code:			