## IN THE CHILDREN'S COURT OF NEW SOUTH WALES AT

**CASE NUMBER** 

## Notice of transfer of primary case responsibility to a Designated Agency and confidentiality statement

Children and Young Persons (Care and Protection) Act 1998

Practice Note 17 cl. 4.1, 4.2

Practice Note 17 cl. 4.1, 4.2
Children and young person
Name
Application details
Type of application
Date application filed
Details of Designated Agency
Name of Designated Agency:
Address of Designated Agency:
Name of allocated Designated Agency caseworker or equivalent:
Name of allocated Designated Agency manager or equivalent:
Date on which primary case responsibility transferred from DCJ to the Designated Agency:
A Confidentiality Agreement is in place between the Designated Agency and DCJ: ☐ Yes ☐ No
Signatures
Signature of Designated Agency Representative
Capacity [e.g. Manager]
Date
Signature

Form 47 (version 1)

Signature of Department of Communities and Justice representative

Capacity [e.g. Manager Casework]

Date

Signature