

Counselling certificate for parties married less than 2 years

ATTACH THIS CERTIFICATE TO THE BACK OF THE DIVORCE APPLICATION

Part A About the parties

PARTY 1 (APPLICANT)

1 Family name as used now

Given names

2 What is your contact address (address for service) in Australia?
You do not have to give your residential address that you will receive documents.

<input type="text"/>	
<input type="text"/>	
State	Postcode
Phone	Fax*
DX	
Lawyer's code	
Email*	

PARTY 2

Family name as used now

Given names

What is your contact address (address for service) in Australia?
You may give another address at which you are satisfied

<input type="text"/>	
<input type="text"/>	
State	Postcode
Phone	Fax*
DX	
Lawyer's code	
Email*	

* Please do not include email or fax addresses unless you are willing to receive documents from the Court and other parties in that way.

3 Date of the marriage [DAY/MONTH/YEAR] / /

Part B About the Family counsellor or other specified person

4 Family name Given names

5 Organisation

6 Address of organisation

7 Details of counselling

Part C Certificates – complete one only

Section 44(1B)

I certify that both parties attended the counselling set out in Question 7 and considered reconciliation.

Signature _____

Full name _____

Position _____

Date / /

Section 44(1C)

I certify that:

- (a) Only the Applicant (Party 1) attended the counselling set out in Question 7 and considered reconciliation and
- (b) The other party (Party 2) was invited to consider reconciliation but did not attend.

Signature _____

Full name _____

Position _____

Date / /