

Recovery Order Information Sheet

RECOVERY ORDERS

A Recovery Order is an order of a Court issued pursuant to section [67U](#) of the [Family Law Act 1975 \(Cth\)](#). If you would like more information about Recovery Orders, you may wish to read the Family Law Courts fact sheet '[Recovery Orders](#)' which provides further information.

The AFP will only accept and act upon a Recovery Order from the issuing Court. The AFP receives all Recovery Orders issued by all Courts across Australia, with the exception of Western Australia. If your Recovery Order was issued in WA, please contact the WA Police.

The AFP requires this completed Recovery Order Information Sheet to enable an effective response to the Recovery Order.

Note: Police will not generally recover a child, except in extraordinary circumstances, until the person to whom the child is to be returned is in a position to receive the child and is close by.

For further information, see www.familylawcourts.gov.au or the AFP's [Family Law Kit](#).

INSTRUCTIONS FOR COMPLETING THIS FORM

Failures to fully complete this form may delay the actioning of your orders.

This form is to be completed by the applicant, or their legal representative, in proceedings where a Recovery Order has been issued. Once complete, the information contained herein may be made available by the AFP to the Marshal, the Australian Customs and Border Protection Service, Australian & overseas law enforcement agencies as well as other State, Territory and Commonwealth Government agencies in order to facilitate the execution of your orders.

Legal Assistance

You may wish to seek legal assistance from a legal aid office, community legal centre or private law firm. If you are an Aboriginal or Torres Strait Islander, you can also contact your local Aboriginal or Torres Strait Islander legal service.

AFP staff can help you with questions about completing this form and the recovery process, but cannot give you legal advice.

Privacy

The AFP collects, holds, uses and discloses personal information for purposes which are directly related to our functions or activities as set out in section 8 of the [Australian Federal Police Act 1979 \(Cth\)](#) and the [Ministerial Direction](#), and only when it is necessary or directly related to such purposes.

The AFP is also subject to the Australian Privacy Principles as contained in section 14 of the [Privacy Act 1988 \(Cth\)](#). Please see the [AFP Privacy Policy](#) for information on how the AFP complies with its obligations.

In addition, section [121](#) of the [Family Law Act 1975 \(Cth\)](#) creates obligations regarding disclosure or publication of Court proceedings and related information. Police can only discuss specific family law matters with immediate parties to the proceedings, or their lawyer. If you would like more information about section [121](#), you may wish to read the Family Courts fact sheet '[Publication Orders and Section 121 of the Family Law Act 1975](#)' which provides further information.

COURT PROCEEDINGS

File No		Next Court date	
Court			

Details of any other proceedings that may impact or be relevant to this recovery order, including family violence.

APPLICANT _____

Full name			Date of birth	
Relationship to child			Drivers licence	
Residential address				
Work address				
Telephone			Mobile	
Email				
Lawyer			Firm	
Do you require an interpreter?	<input type="checkbox"/> No <input type="checkbox"/> Yes, state language and dialect			

INDEPENDENT CHILD LAWYER

Complete the following if you are the Independent Child Lawyer (ICL), or if an ICL is involved in these proceedings.

Full name		Firm	
Work address			
Telephone		Mobile	
Email			

THE OTHER PARTY / RESPONDENT

Full name		Date of birth	
Relationship to child		Passport (if known)	
Residential address			
Usual occupation		Employer	
Work address			
Telephone		Mobile	
Email			
Vehicle make / model / colour		Vehicle Rego	
Lawyer		Firm	

INFORMATION ABOUT THE OTHER PARTY / RESPONDENT

If you answer YES to these questions, please provide further information on the following page, under “Information about the Other Party / Respondent”.

1. Is the other party aware of this Recovery Order ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Is the other party known to Police ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Does the other party have any history of violence?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Does the other party have any history of illicit substance use?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Does the other party have any history of self-harm?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Has the other party been subject of a <i>Domestic Violence Order</i> or <i>Apprehended Violence Order</i> ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Does the other party own or have access to weapons, including firearms?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Is the other party currently taking any prescribed medication?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Is the other party affiliated with any Criminal Organisations or Outlaw Motor Cycle Gangs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. Does the other party have any other children from another relationship?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11. Does the other party have any friends or relatives interstate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. Does the other party have any friends or relatives overseas?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13. Does the other party have any bank accounts?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
14. Does the other party use Facebook, Twitter or other social media?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
15. Does the other party require an interpreter?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
16. Does the other party have a partner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

OTHER PARTY’S PARTNER (if known)

Full name		Relationship to child	
Residential address			
Usual occupation		Employer	
Workplace & address			
	Telephone		Mobile
	Work		Email
Vehicle make / model / colour		Vehicle Rego	

INFORMATION ABOUT THE OTHER PARTY / RESPONDENT (Continued)

If more space is required for extra children, copy and attach an extra page.

CHILD DETAILS

Full name		Date of birth	
Gender		Passport No	
Residential address			
Telephone		Mobile	
Email			
Photograph included	<input type="checkbox"/> Yes <input type="checkbox"/> No		

HELPFUL INFORMATION ABOUT THE CHILD

If you answer YES to these questions , please provide further information on the following page, under “Information about the Child”.

- | | | | |
|----|---|------------------------------|-----------------------------|
| 1. | Does the child have any history of violence? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2. | Does the child have any history of illicit substance use? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3. | Does the child have any history of self-harm? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4. | Does the child have any special needs? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5. | Is the child currently taking any prescribed medication? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. | Does the child use Facebook, Twitter or other social media? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

POSSIBLE LOCATIONS OF THE CHILD

Provide details of any possible locations of the child, including who the child may be with, including their name, relationship to the child, address, contact numbers, email addresses and vehicles.

School	
School address	

DECLARATION

1. I am / represent the applicant in relation to this Recovery Order.
2. I have read this information sheet and the facts of which are true and correct.
3. I or my client will immediately notify the Australian Federal Police of any changes to the above information.
4. I acknowledge that the information contained herein may be made available by the AFP to the Marshal, the Australian Customs and Border Protection Service, Australian & overseas law enforcement agencies as well as other State, Territory and Commonwealth Government agencies in order to facilitate the execution of your orders.
5. In the event of the whereabouts of the child becoming known or suspected by the Marshal, Australian Federal Police or State and Territory Police, the applicant will be required to attend at such place and time to take delivery of the child.
6. I understand that all costs incurred in effecting the delivery (eg. travel, sustenance etc of the applicant and child) will be borne by the applicant and will not be met by the Commonwealth, the Australian Federal Police or any State or Territory Police service.

☐ I declare that the information I have given in this document is true and correct to the best of my knowledge. I understand that it is an offence to knowingly give false or misleading information contrary to section 137.1 of the *Criminal Code 1995* (Cth), an offence punishable by a term of imprisonment of 12 months.

Signature

Date

Name

Position

Address