

APPLICATION TO REVOKE OR REASSESS GUARDIANSHIP OR ADMINISTRATION ORDER

DO YOU NEED TO COMPLETE THIS FORM?

- Use this form if you want VCAT to revoke (cancel) or reassess a Guardianship or Administration order.
- Aside from sending VCAT a copy of your application, you must send a copy of this completed application to the person you are applying about (if it is not yourself) and to other interested persons, including any primary carer, nearest relative and any existing guardian or administrator.
- If you need advice about completing the form or further information from VCAT, please call 1300 01 8228 (1300 01 VCAT) to speak to a staff member of the Guardianship List. Further information is also available on the VCAT website: www.vcat.vic.gov.au

APPLICANT DETAILS

1. Name of applicant

Title Given names Last name

2. Address

Organisation (if applicable)

Street number and name

Suburb State Postcode

3. Contact details

Please provide at least one contact number

Business phone After hours phone

Business fax Mobile phone

Email

4. Is this application about you?

Yes No

5. Your relationship to the person you are applying about

(eg. are you their son, mother, case manager etc.)

Relationship

6. VCAT reference number (if known)

DETAILS OF THE PERSON YOU ARE APPLYING ABOUT

7. Are you the person with an administrator or guardian?

Yes, skip to Question 11 No

8. Name of the person you are applying about:

Title Given names Last name
Date of birth (dd/mm/yyyy) / /

9. Address

Street number and name
Suburb State Postcode

10. Contact details

Please provide at least one contact number

Business phone After hours phone
Business fax Mobile phone
Email address

11. Is the person with an administrator or guardian homeless?

Yes No

DETAILS OF ANY KNOWN RELATIVES AND/OR INTERESTED PARTIES

Provide details of any known relatives and/or interested parties including any spouse, partner, parents, children or step children.

12. Do you (if the application is about yourself), or the person you are applying about have any known relatives and/or interested parties?

Yes No, skip to Question 33

Details of known relative or interested person - Person 1

13. Name of relative or interested person

Title Given names Last name

14. Address of relative or interested party

Street number and name
Suburb State Postcode

15. Contact details of relative or interested party

Provide at least one contact number.

Business phone After hours phone
Business fax Mobile phone
Email

16. What's their relationship to the person with a guardian or administrator?

Relationship

Details of known relative or interested person - Person 2

17. Name of relative or interested person

Title Given names Last name

18. Address of relative or interested party

Street number and name

Suburb State Postcode

19. Contact details of relative or interested party

Provide at least one contact number.

Business phone After hours phone

Business fax Mobile phone

Email

20. What's their relationship to the person with a guardian or administrator?

Relationship

Details of known relative or interested person - Person 3

21. Name of relative or interested person

Title Given names Last name

22. Address of relative or interested party

Street number and name

Suburb State Postcode

23. Contact details of relative or interested party

Provide at least one contact number.

Business phone After hours phone

Business fax Mobile phone

Email

24. What's their relationship to the person with a guardian or administrator?

Relationship

Details of known relative or interested person - Person 4

25. Name of relative or interested person

Title Given names Last name

26. Address of relative or interested party

Street number and name

Suburb State Postcode

27. Contact details of relative or interested party

Provide at least one contact number.

Business phone After hours phone

Business fax Mobile phone

Email

28. What's their relationship to the person with a guardian or administrator?

Relationship

Details of known relative or interested person - Person 5

29. Name of relative or interested person

Title Given names Last name

30. Address of relative or interested party

Street number and name

Suburb State Postcode

31. Contact details of relative or interested party

Provide at least one contact number.

Business phone After hours phone

Business fax Mobile phone

Email

32. What's their relationship to the person with a guardian or administrator?

Relationship

APPLICATION TO REVOKE OR REASSESS AN ADMINISTRATION ORDER

33. Do you want VCAT to revoke or reassess an existing administration order?

Yes

No, skip to Question 36

Language/dialect

34. When was the current VCAT order made (if known)

35. Why do you want VCAT to revoke or reassess the existing administration order?

Regained capacity (you must supply a copy of an updated medical report in support of this)

Administrator not acting in the best interests of represented person

Administrator does not wish to continue

Death or illness of Administrator

Other, please specify:

APPLICATION TO REVOKE OR REASSESS A GUARDIANSHIP ORDER

36. Do you want VCAT to revoke or reassess an existing guardianship order?

Yes

No, skip to Question 39

Language/dialect

37. When was the current VCAT order made (if known)

38. Why do you want VCAT to revoke or reassess the existing guardianship order?

Regained capacity (you must supply a copy of an updated medical report in support of this)

Guardian not acting in the best interests of represented person

Guardian does not wish to continue

Death or illness of Administrator

Other, please specify:

REASON FOR APPLICATION

39. Briefly outline the issues or problems faced by the person you are applying about which have prompted your application:

HEARING ARRANGEMENTS

The person with a guardian or administrator must attend the hearing unless there are exceptional circumstances.

40. Can the person you are applying about attend the hearing?

Yes, skip to Question 42

No

41. State the exceptional circumstances preventing the person you are applying about from attending.

42. Does the person you are applying about require an interpreter?

- Yes No, skip to Question 43

Specify language/dialect

43. Does anyone attending the hearing have concerns about their personal safety?

- Yes No, skip to Question 44

If yes, tell us who has concerns about their personal safety at the hearing and why

44. Does the person you are applying about require any other special assistance?

- Yes No

Please specify what special assistance is required

SUPPORTING DOCUMENTS

Prior to the hearing, you must provide documents that support your application.

- **Medical report(s)**
Copy of recent medical report(s).
- **Supporting documents**
Other supporting documents including power of attorney (financial/medical) and/or enduring power of guardianship, copy of the will, social work report, neuropsychological report, affidavit in support, any previous order, covering letter etc.

If providing your attachment electronically, please supply in these formats: docx; jpeg; xls; ppt; doc; pdf.

ACKNOWLEDGEMENT

By signing this form, I declare that the information provided is true and correct.

- To the best of my knowledge, all information provided in this application is true and correct
- it is an offence under section 136 of the Victorian Civil and Administrative Tribunal Act 1998 to knowingly give false or misleading information to VCAT.

Date [/ /] (dd/mm/yyyy)

PRIVACY STATEMENT

The information collected in this application will be used to assess the application and determine the eligibility to initiate a proceeding at the Victorian Civil and Administrative Tribunal (VCAT).

The Victorian Civil and Administrative Tribunal Act 1998 governs what information is available to the public.

The Information Privacy Act 2000 and the Victorian Privacy Principles set out the requirements that persons must abide by. Section 10 of the Act refers to Courts and Tribunals and the exemptions that apply to them.

For further information regarding our privacy policy, go to www.vcat.vic.gov.au/privacy

ADDITIONAL INFORMATION

Below is a list of frequently used words/terms in the Guardianship List:

Administrator - A person appointed by VCAT to make decisions on behalf of an adult with a disability who is unable to make reasonable judgements in respect of matters relating to all or any part of her or his estate by reason of the disability.

Applicant - The person who makes the application.

Capacity - An adult is deemed to have capacity if they have an ability to understand the consequences of a decision and can take responsibility for making a choice.

Certified copy- A copy of a document on which an authorised person has certified: 'this is a true and complete copy of the original'.

Disability - In relation to a person, means intellectual impairment, mental disorder, brain injury, physical disability or dementia.

Donor - A person who gives an enduring power of attorney (medical treatment).

Guardian - The person appointed by VCAT to make decisions for an adult who has a disability and is unable to make reasonable decisions regarding lifestyle, such as where a person will live.

Guardianship list- The Guardianship list is the part of VCAT that has the power to protect vulnerable adults, including power to appoint administrators and guardians, and make orders about enduring powers.

Interested parties - People who play a significant role in the life or care of the represented person, including spouse, domestic partner, children, stepchildren.

Jointly appointed - Means that all appointed decision-makers must make decisions together.

Jointly & severally appointed - Means that the appointed decision-makers can make decisions or sign documents together or separately, unless otherwise specified in the order.

Limited order - A limited order specifies in which areas of the represented person's life decisions can be made; for example, decisions related to accommodation.

Nearest relative - It means the spouse or domestic partner of a person, or where there is no spouse or partner, the relative of the person set out in section 3 of the Guardianship and Administration Act 1986.

Order - A legally binding decision by VCAT.

Power of attorney -

- a general power of attorney - someone appointed by the principal to make financial or legal decisions, usually for a specific period of time, such as when a person is away on holidays and ceases when the principal loses capacity or revokes it.
- an enduring power of attorney (financial) - someone appointed by the principal to make financial and legal decisions, such as signing a legal document, selling property or doing banking. It can operate immediately or when the principal loses the capacity to make these decisions.
- an enduring power of attorney (medical treatment) - an agent appointed by the donor to make medical decisions, such as agreeing to or refusing surgery. It takes effect only if the donor loses capacity to make these decisions.
- an enduring power of attorney (personal) – someone appointed by the principal to make lifestyle and health care decisions. It can operate immediately or when the principal loses capacity to make these decisions.

Primary carer - Any person who is responsible for providing support or care to the represented person.

Principal - a person who gives a general power of attorney or enduring power of attorney (financial and/or personal).

Public advocate (office of) - An independent office of the Victorian State Government, established to promote the rights of, and advocate for, Victorians with a disability. The Public Advocate can act as a guardian of last resort on appointment by VCAT.

Reassessment - A hearing at which VCAT considers if there is an on-going need for an administration or guardianship order.

Rehearing - A hearing at which VCAT rehears matters which are the subject of the order.

Represented person - The person who is subject to the order.

Revoke - To cancel an enduring power or an order such as an administration or guardianship order.

Severally - The appointed decision-makers can make decisions separately, unless otherwise specified in the order.

LODGEMENT

Before you lodge this form, you must :

- Send a copy of this completed application to the person you are applying about (if it is not yourself) and other interested persons, including any primary carer, nearest relatives and any existing or proposed guardian or administrator. If for some reason you cannot send a copy, you must notify VCAT as soon as possible.
- Ensure VCAT has the medical reports which establish the capacity of the person you are applying about. If you are not attaching the reports at the time you lodge your application, you must have requested them and given the doctor's details.
- Acknowledge and date this form.

Important note: If you fail to provide a completed copy of the application to the persons entitled to it, or if you fail to provide medical or other expert evidence in support of the application, VCAT may adjourn the hearing and order you to pay any costs that may be sought by another party.

You can submit this application form to VCAT either by email, by post or in person.

By email

Email humanrights@vcat.vic.gov.au

In person

Deliver this form to :
Victorian Civil and Administrative Tribunal
William Cooper Justice Centre
5/223 William Street
Melbourne VIC 3000

By post

Send this form to:
Victorian Civil and Administrative Tribunal
GPO Box 13193 Law Courts
Law Courts VIC 8010