

Application notice

(For use in applications made within appeals to the Family Division of the High Court)

For help in completing this form please read the notes for guidance form FP244A.

Name of court In the Family Division of the High Court	
Fee account no. (if applicable)	Help with Fees – Ref. no. (if applicable)
	H W F – <input type="text"/> <input type="text"/> <input type="text"/> – <input type="text"/> <input type="text"/> <input type="text"/>
Appeal Court Ref no. (if applicable)	
Appellant's name	
Respondent's name	
Date	

1. What is your name or, if you are a legal representative, the name of your firm?

2. Are you a Appellant Respondent Legal Representative
 Other (please specify)

If you are a legal representative whom do you represent?

3. What order are you asking the court to make and why?

4. Have you attached a draft of the order you are applying for? Yes No

5. How do you want to have this application dealt with?
 at a hearing without a hearing
 at a telephone hearing

6. How long do you think the hearing will last? (If known) Hours Minutes
Is this time estimate agreed by all parties? Yes No

7. Give details of any fixed trial date or period

8. Who should be served with this application?

8a. Please give the service address, (other than details of the appellant or respondent) of any party named in question 8.

9. What information will you be relying on, in support of your application?

- the attached witness statement
 the evidence set out in the box below

If necessary, please continue on a separate sheet.

Statement of Truth

(I believe) (The applicant believes) that the facts stated in this section (and any continuation sheets) are true.

Signed _____ Dated _____

Applicant/Applicant's legal representative/
Applicant's litigation friend

Full name _____

Name of applicant's legal representative's firm _____

Position or office held _____
(if signing on behalf of firm or company)

10. Signature and address details

Signed _____ Dated _____

Applicant/Applicant's legal representative/Applicant's litigation friend

Position or office held _____
(if signing on behalf of firm or company)

Applicant's address to which documents about this application should be sent

Postcode

If applicable	
Phone no.	
Fax no.	
DX no.	
Ref no.	

E-mail address

Completed forms should be returned to the

Family Division Appeals Office, Floor 1M, Queen's Building, Royal Courts of Justice, Strand, London, WC2A 2LL
DX 44450 Strand
Email: appeals.familydivision@hmcts.gsi.gov.uk