Appellant: Date of Birth: Address: CNI:

Licence Number: Magistrate:

Place of Conviction: Date of Conviction: Offence(s):

**Application for Leave to Appeal**

Select appropriate option:

I apply to the District Court for leave to appeal to file Notice of Appeal outside of 28 days.

I apply to the District Court for leave to appeal against a conviction entered after a plea of guilty (does not apply to severity appeals).

I apply to the District Court for leave to appeal against an Apprehended Violence Order made by consent.

I apply to the District Court for leave to appeal against an Apprehended Violence Order made in my absence.

A Notice of Appeal is attached.

The grounds upon which I seek leave to appeal are:

Signature of appellant: Dated:

at:

# Important Note:

1. **A Notice of Appeal must be attached to this application.**
2. **The lodgement of this application for leave to appeal does not stay proceedings.**
3. **The District Court will not generally grant leave to appeal unless all rights for review by the Local Court of this conviction or order have been exhausted.**

Page **1** of **1**