MENTAL HEALTH COURT OF QUEENSLAND

REGISTRY:

NUMBER:

In the matter of: *(insert name)*

Date of birth: *(insert date)*

 ORDER – APPEALS AND STAYS

Before: *Justice*

Date:

Initiating document: appeal filed against decision of Mental Health Review Tribunal dated *(insert date).*

THE COURT ORDERS THAT:

*Appeal*

1. The appeal is *(insert as appropriate)*.
2. The decision of the Mental Health Review Tribunal of *(insert date)* is *(insert as appropriate)*.

*Stay*

1. The request for a stay of the decision of the Mental Health Review Tribunal of *(insert date)* is refused.
2. The request for a stay of the decision of the Mental Health Review Tribunal of *(insert date)* is granted pending the hearing of the appeal.

THE COURT DIRECTS THAT:

1. *(set out terms of direction in numbered paragraphs)*

Signed:

 Registrar