

Court File Number

(Name of Court)

Form 33F: Consent to Secure Treatment (person other than child)

at _____
Court office address

Applicant(s)

Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Child

Full legal name of child:
Birthdate:
Sex:

Lawyer's name & address — street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any).

Name and address of secure treatment program in this case

My name is (full legal name) _____ and I am

- the administrator of the secure treatment program. I consent to this application for
 - the child's commitment to the program.
 - an extension of the child's commitment to the program.
 - an extension of the commitment to the program of the person admitted into it who has now attained the age of eighteen years.
- the child's parent. I consent to
 - this application for the commitment of my child who is in the care of a person other than the administrator of the secure treatment program.
 - my child's commitment to the secure treatment program for a period of 180 days in this application brought by (full legal name of applicant children's aid society) _____
 - this application by the administrator of the secure treatment program for an extension of my child's admission to the program.
- an authorized representative of the Minister of Children and Youth Services for Ontario. I consent to the admission of the child who is less than twelve years old to the secure treatment program.
 - temporarily while this case for an order of commitment or for an order extending it is adjourned.
 - on the court's final order of commitment or extending commitment.
- an officer of (full legal name of children's aid society) _____

I am authorized, on behalf of the society, to consent to this application of the administrator of the secure treatment program for an extension of the child's commitment to that program.

- the person who is the subject of this case. I am 18 years of age or more. I consent to this application to extend my commitment to the secure treatment program to which I am now admitted.

Signature

Date of signature