|  |  |
| --- | --- |
| **Application for revocation of a placement order** | Form A52 |
| ***Section 24 Adoption and Children Act 2002*** |  |
| **The court** | **To be completed by the court** |
|  | **Date issued** |  |
| **Case number** |  |
| **The full name(s) of the child(ren)** | **Child(ren)’s number(s)** |
|  |  |
| **Notes to applicants** |
| * **Before filling in this form, please read the guidance notes on completion.**
 |
| * **Please complete every Part. If any Part does not apply to you, or you are not sure of the answer to any question, please say so.**
 |
| * **If there is not enough room for your reply to any question, please continue on a separate sheet. Please put the child’s name, the Part and the number of the question at the head of the continuation sheet.**
 |
| * **Use black ink when filling in this form.**
 |
| **Part 1 About you** |
|  | **Title:** | **□ Mr.** | **□ Mrs.** | **□ Miss** | **□ Ms.** | **□ Other** | \_\_\_\_\_\_\_ |
|  | **First name(s) in full** |  | **Last name** |
|  |  |  |  |
|  | **I am an authorised officer of Kent County Council and my address is:** |
|  | [address (including post code)] |
|  | **My telephone number is:** | **5)** | **My position in the local authority is:** |
|  |  |  |  |
|  | **My solicitor in these proceedings is** |
|  | **Name of solicitor** |  |
|  | **Name of firm** |  |
|  | **Address:** |  |
|  |  |  |
|  | **Telephone no:** |  | **Fax no:** |  |
|  | **E-mail address:** |  | **DX no:** |  |
|  |  |  |
|  | **I am:** |  | the child named in the placement order |
|  |  |  | an authorised representative of the local authority named in the placement order |
|  |  |  | the mother of the child named in the placement order |
|  |  |  | the father of the child named in the placement order |
|  |  |  | a guardian of the child named in the placement order |
|  |  |  | none of the above. I am [insert] |
| **Part 2 About the Child** |
|  | **First name(s) in full** |  | **Last name** |
|  |  |  |  |
|  | **The child is a:** | **The child was born on:** |
|  | **□ Boy** | **□ Girl** | [DOB] |
|  | **The local authority authorised to place the child for adoption is:** |
|  |  |  |
|  | **Name of local authority** |  |
|  | **Social worker:** |  |
|  | **Address of social worker:** |  |
|  |  |  |
|  | **About other orders or proceedings that affect the child** |
|  |  | **To the best of my knowledge, no proceedings relating to the child (other than the placement order entered in Part 4 of this application) have been completed or commenced in any court** |
|  | **or** |  |
|  |  | **The following proceedings relating to the child have been completed / commenced (in addition to placement order entered in Part 4 of this application** |
|  | **Order(s) made (or applied for)** | **Date of order(s)** | **Name of court** | **Case number** |
|  |  |  |  |  |
|  |  |  |
|  | **Cases concerning a related child** |
|  |  | **To the best of my knowledge, no proceedings relating to a full, half or step brother or sister of the child have been completed or commenced in any court** |
|  | **or** |  |
|  |  | **The following proceedings relating to a full, half or step brother or sister of the child have been completed/commenced** (please give details below and, if you were a party to any proceedings that have been completed, attach a copy of the final order) |
|  |
|  | **Relationship to child (eg. sister, half-brother)** | **Type of Order made (or applied for)** | **Date of Order (or date of next hearing)** | **Name of Court** | **Case number (or serial number)** |
|  |  |  |  |  |  |
| **Part 3 About the child’s parents or guardian** |
|  | **The child’s mother is** |  | **The child’s father is** |
|  | **First name(s) in full** |  | **First name(s) in full** |
|  |  |  |  |
|  | **Last name** |  | **Last name** |
|  |  |  |  |
|  | **Her address is (if deceased, please write ‘Deceased’ in the address box)** |  | **His address is (if deceased, please write ‘Deceased’ in the address box)** |
|  |  |  |  |
|  |  |  | **Does he have parental responsibility for the child? *See Note 8*** |
|  |  |  | **□ Yes** | **□ No** |
|  |  |  | **If No, does he intend to apply for an order under section 8 of the Children Act 1989 (a parental responsibility order or a child arrangements order) in respect of the child?** |
|  |  |  | **□ Yes** | **□ No** |
| **The child’s guardian** |
|  | **The child’s guardian is *See Note 9*** |  |  |  |
|  | **First name(s) in full** |  |  |
|  |  |  |  |
|  | **Last name** |  |  |
|  |  |  |  |
|  | **His/her address is** |  |  |
|  |  |  |  |
| **Part 4 About this application** |
|  | **I apply for revocation of the order made by (give name of court) on (date) authorising Kent County Council to place (give name of child) for adoption.** |
|  | **A copy of the placement order is attached.** |
|  | **The court’s permission to make this application** |
|  |  | **is not required** |
|  |  | **has been given (give details below and attach a copy of the court order giving permission)** |
|  | **The reasons for this application are:** |
|  |  |
| **Part 7 Statement of truth** |
|  | **[[1]](#footnote-1)\*[I believe] [The applicant believes] that the facts stated in this application are true.** |
|  | **\*I am duly authorised by the applicant to sign this statement.** |
|  | **Print full name:** |  |
| **Date:** |  | **Signed:** |  |
|  |  |  | **\*[Applicant] [Applicant’s solicitor]** |
|  |  |
| **If you attend the court for a hearing** |
|  | **Do you have a disability for which you require special assistance or special facilities? *See Note 14*** |
|  | **□ Yes** | **□ No** |  |
|  | **If Yes, please say what your needs are below (the court staff will get in touch with you about your requirements)** |
|  |  |
| **What to do now** |
|  | Once you have completed and signed this form, you should take or send the form and three copies to the Court, together with the court fee and the following documents: |
|  | * a copy of the placement order you are asking the court to revoke;
 |
|  | * if you were a party to the proceedings, a copy of any other final order relating to the child that has effect;
 |
|  | * if you were a party to the proceedings, a copy of any final order relating to a full, half or step brother or sister of the child that has effect;
 |
|  | * a copy of any order giving you permission to apply for the placement order to be revoked.
 |
|  | * If you are not sure about the court fee payable for your application, or you think that you may be exempt from paying all or part of the fee, you should contact the court for information.**;**
 |

1. \* **delete as appropriate** [↑](#footnote-ref-1)