

Appeal request

Use this when your client wishes to appeal against conviction or sentence.

Attach to this request

1 **a copy of the judgment** and/or **sentencing remarks** and/or **relevant sections of the transcript**

AND

2 where counsel was briefed at trial, **counsel's comments**, if any, on the prospects of a successful appeal (either in the form of counsel's written opinion, or if verbal, your typed record of this advice),
and send to the Assignment Officer in this matter.

Full name of client

File number (if applicable) **Date decision handed down**/...../.....

Nature of appeal (*circle*) AS OF RIGHT / BY LEAVE.

If BY LEAVE, state whether and why you anticipate it will be granted.

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Proposed grounds of appeal (please attach a copy of the grounds of appeal if they have already been drawn or filed)

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Do you consider that this leave to appeal/appeal has reasonable prospects of success?

YES / NO

If YES (and there is no opinion from counsel), give your reasons:

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Signature of solicitor

Date/...../..... Solicitor's name (*in capitals*)