

WITNESS ANONYMITY ORDERS

Date completed:	Date of completion of form (NOT case). NB: To be sent to Policy on the last working day of each month.	Reviewing Lawyer:	Name of the lawyer who made decision about witness anonymity. They are responsible for completion of the form.			Tel No.	Direct line
AREA:							
URN No:							
COURT:	Name and type of court (Crown Court/ Magistrates' court/ Youth Court).						
Names of all defendants and the remand status of each:	Defendant(s):				Remand status:		
	Names of all defendants to be listed here						
Case/Operation name: <i>(if applicable)</i>							
Case details:	List the charges and provide a <u>brief</u> outline of the case.						
Number of witnesses in respect of whom anonymity orders were sought by the police:	Civilian		Undercover police officer		Test purchase officer		Other (please specify)
On what grounds was the order sought?	Give a <u>brief</u> outline of the reasons for the application making it clear whether the order was sought on fear or public interest grounds.						
Give details of any police requests for WAO that were not sought:	Give reasons why an application for witness anonymity was not sought.						
Have you made the application?	<i>Delete as applicable</i>		Has the application been decided?	<i>Delete as applicable</i>		If YES complete the following boxes	
	YES	NO		YES	NO		
Outcome of the application and any reasons given by the court. Please also indicate measures adopted:	Provide details of the outcome of the application and the type of measures applied (e.g. screens, voice modulation etc).						
Outcome of the case:	Give case outcome if known when the form is completed; otherwise provide information about the stage of the case and the next date of hearing.						
Did the case have to be terminated because an order was not granted?	<i>Delete as applicable</i>		Details:				
	YES	NO					