
What I want to tell the Tribunal

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| **Name:** |  |
| **Hearing date:** |  |
| **What do you think about your treatment?****What do you think about being on a Treatment Order?** **If you are in hospital, would you prefer to be treated in the community?****Who could help you stay well? How?** |  |
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| **Is anything in the report wrong?** **Do you meet the 4 criteria for compulsory treatment below? If not, why?** 1. **Do you have a mental illness?**
2. **Do you need treatment now to prevent:**

* **a serious deterioration in your mental health or physical health, or**
* **serious harm to you or someone else?**
1. **Will you be treated now if you are on a Treatment Order?**
2. **Is a Treatment Order the only way to ensure you will get the treatment you need?**
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| **Signature:** |  | **Date:** |  |

You can bring this worksheet to your hearing or email it to the Tribunal at mht@mht.vic.gov.au.