

<p style="text-align: center;">Plaintiff / Plaintiff Employer (Work Injunction Only)</p> <hr/> <p style="text-align: center;">Date of Birth</p> <hr/> <p>Agent's Name (Work Injunction Only)</p>	<p style="text-align: center;">Defendant</p> <hr/> <p style="text-align: center;">Address</p> <hr/> <p style="text-align: center;">City, State, ZIP</p> <hr/> <p>Phone: _____</p>	<p style="text-align: center;">Case Number</p> <p style="text-align: center;">THIS IS <u>NOT</u> A COURT ORDER</p> <p>Petition for:</p> <p><input type="checkbox"/> Order of Protection</p> <p><input type="checkbox"/> Injunction Against Harassment</p> <p><input type="checkbox"/> Workplace Injunction</p>
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Please read the Plaintiff's Guide Sheet before filling out this form.

1. Defendant/Plaintiff Relationship:
 - Married now or in the past
 - Live together now or lived together in the past
 - Child in common
 - One of us pregnant by the other
 - Related (parent, in-law, brother, sister, or grandparent)
 - Romantic or sexual relationship (current or previous)
 - Dating but not a romantic or sexual relationship
 - Other: _____

 2. If checked, there is a pending action involving maternity, paternity, annulment, legal separation, dissolution, custody, parenting time, or support in _____ County Superior Court, Case # _____.

(county)

 3. Have you or the Defendant been charged or arrested for domestic violence OR requested a protective order?
 - Yes No Not sure
 - If yes or not sure, explain: _____

 4. I need a court order because: (Please Print)
- Tell the judge what happened and why you need this order. A copy of this petition is provided to the defendant when the order is served. (Do not write on back or in the margin. Attach additional paper if necessary.)

Date(s)	Incident(s)

Case Number _____

5. The following persons should also be on this order. As stated in number 4, the Defendant is a danger to them:

Name:	Date of Birth:
Name:	Date of Birth:
Name:	Date of Birth:
Name:	Date of Birth:

6. Defendant should be ordered to stay away from these locations, at all times, even when I am not present:
(choose one or more of the options below)

Home: _____

Work: _____

School/Other: _____

7. If checked, because of the risk of harm, order the Defendant NOT to possess firearms or ammunition.

8. If checked, order the Defendant to participate in domestic violence counseling or other counseling. This can be ordered only after a hearing of which the Defendant has notice and an opportunity to participate.

9. Other: _____

Under penalty of perjury, I swear and affirm the above statements are true to the best of my knowledge, and I request an Order/Injunction granted relief as allowed by law.

Plaintiff

Attest: _____
Judicial Officer/Clerk/Notary

Date