IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS

PETITIONER'S/AFF	FIANT'S FIRST NAME, LAST NAME	PETITIONER'S/	AFFIANT'S HOME ADDRI	ESS (STREET)			
AGE	DATE OF BIRTH	CITY	STATE	ZIP CODE			
DRIVER'S LICENSE NUMBER		PETITIONER'S/	PETITIONER'S/AFFIANT'S PLACE OF WORK (NAME)				
TELEPHONE NUMI	BER	STREET ADDRE	ESS OF PLACE OF WORK				
		CITY	STATE	ZIP CODE			
VS.	CASE NO. 60DR_						
RESPONDENT'S FI	RST NAME, LAST NAME	RESPONDENT'S	S HOME ADDRESS (STRE	ET)			
AGE	DATE OF BIRTH	CITY	STATE	ZIP CODE			
DRIVER'S LICENSI	E NUMBER	RESPONDENT'S	S PLACE OF WORK (NAM	E)			
TELEPHONE NUMI	BER	STREET ADDRE	ESS OF PLACE OF WORK				
		CITY	STATE	ZIP CODE			

DIVISION

PETITION AND AFFIDAVIT FOR AN ORDER OF PROTECTION

I, the petitioner/affiant am asking the Court to issue an Order of Protection. A hearing will be set within 10 to 30 days. At the hearing, I will present evidence for an Order of Protection, and the respondent will have an opportunity to appear and contest the Order of Protection. I state, under oath and subject to the penalty of PERJURY, that the following facts are true and correct to the best of my knowledge and belief:

1. _____ I am at least 18 years of age, or _____ I am under 18 years of age but emancipated.

_____ Respondent is at least 18 years of age, or _____ under 18 but emancipated.

I am an employee or volunteer of a domestic violence shelter or program, and I am filing on behalf of a minor.

I am filing this petition:

(A) _____ on behalf of myself AND/OR,

(B) _____ on behalf of a family or household member who is: ______ a minor(s), Name(s): _____

an adjudicated incompetent person(s), Name(s): _____

- 2. The relationship between Respondent and me (or the person(s) on whose behalf I am filing this petition and affidavit is/are: (CHECK ALL THAT APPLY)):
- (A) _____ We are spouses or _____ former spouses (Divorce date: _____)

(B) _____ We are related by blood:

- i. _____ Respondent is the parent
- ii. _____ Respondent is my child
- iii. _____ Other BLOOD relationship; Respondent is my _____.

(C) _____ We currently reside together or cohabited. Date we started living together: Month ____/Year ____.

- (D) _____ We formerly resided together or cohabited. Date we lived together: Month ____/Year ____ until Month ____/Year ____.
- (E) _____ We have or have had a child in common.
- (F) _____ We are presently or in the past have been in a dating relationship. Length of Relationship: Month ____/Year ____ until Month ____/Year ____.
- (G) _____ We are in-laws related by marriage within the second degree of consanguinity.
- 3. I believe I am entitled to an Ex-Parte Temporary Order of Protection because I (or the person(s) on whose behalf I am filing this petition and affidavit am (is/are) afraid of the respondent and there is an immediate and present danger of domestic abuse. (In the following section, describe the details of the MOST RECENT ACT to you or members of your household that caused you to seek the Court's assistance. DO NOT LIST PREVIOUS THREATS OR ACTS OF ABUSE IN THIS SECTION.

DATE OF MOST RECENT ACT: _____

(Include the day of the week)

LOCATION OF MOST RECENT ACT: _		
	(Address)	

***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****

THREATS OF PHYSICAL HARM: (STATE THE SPECIFIC THREATS)

(If more space is needed, you may attach additional page(s) as page 3A, 3B, etc.) ***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****	

ACTUAL PHYSICAL ABUSE OR HARM: (DESCRIBE THE PHYSICAL ACTS)

(If more space is needed, you may attach additional page(s) as page 4A, 4B, etc.)	
***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****	

respondent's release there will be an immediate and present danger of domestic abuse to me. Place of incarceration: Date of release: The reasons I believe I will be in danger when respondent is released are: 4. The above **MOST RECENT ACT** was reported to a law enforcement agency. ____ No. _____ Yes, it was reported to: Agency Date Action taken by the law enforcement agency. 5. **PREVIOUS** acts of domestic violence by Respondent against me (or the person(s) on whose behalf I am filing this petition and affidavit, including verbal threats, harassment and physical abuse, are: (DO NOT INCLUDE THE ACTS LISTED IN SECTION 3). 6. The Respondent has previously been arrested for or convicted of acts of violence. _____ No. _____ Yes. If yes, give the following details: WHEN: ______ WHERE: _____ WHAT RESPONDENT DID: ***** DO NOT WRITE BELOW THIS LINE OR ON BACK OF PAGES *****

OR The respondent is scheduled to be released from incarceration within thirty (30) days and upon the

7. **THE RESPONDENT AND I** have the following minor children: (State their names, ages, and addresses if different from yours.) **DO NOT LIST YOUR CHILDREN UNLESS THEY ARE ALSO RESPONDENT'S CHILDREN.**

NAME	AGE	ADDRESS	
NAME	AGE	ADDRESS	
NAME	AGE	ADDRESS	
If there are minor children l EXCLUDED who are yours			
Petitioner's/Affiant's children	ı only:		
Respondent's children only:			
		e an Ex-Parte Temporary Γ ARE APPLICABLE)	Order of Protection with the
Excluding the Respond Victim. Address of residence		ence or from the residence	ce of the Petitioner/Affiant or
Owner/Renter of residence (C Petitioner Resp	Circle ONE): ondent Both Nei	ther	
Excluding the Respond Petitioner/Affiant or Victim,		usiness, employment, sc	hool, or other location of the
Name of Business or employ	nent		
Address of Business or emplo	byment	City	
School			
Address of School		City	
**** DO NOT W	RITE BELOW THIS	LINE OR ON BACK	OF PAGES ****

Other: Identify: _____

Address

City

_____ Prohibiting the respondent, directly or through an agent, from contacting the petitioner or victim, except under the following conditions:

_____ Awarding Petitioner/Affiant temporary custody of the minor children listed in Paragraph 7:

 Requiring the respondent to pay child support.

 State the weekly take-home pay of Respondent:

____ Requiring the respondent to pay spousal support. State the weekly take-home pay of Respondent: _____

_____ Excluding the Petitioner's/Affiant's address from notice to the respondent.

_____ Requiring Respondent to pay filing fee, service fees, court costs, and Petitioner's/Affiant's attorney's fees (if applicable).

- 9. I, the Petitioner/Affiant, understand that if the Court determines that I am not entitled to an Ex-Parte Temporary Order of Protection, a hearing may still be scheduled for an Order of Protection. I, the Petitioner, request that after the hearing the Court issue an Order of Protection based upon the same provisions I have requested in Paragraph 8.
- 10. A Court Order **ALREADY EXISTS** concerning the custody of Respondent's and my child(ren) listed in Paragraph 7.

_____ No _____ Yes

If YES, state the contents of the order, as follows:

COUNTY AND STATE WHERE ORDER WAS ISSUED

WHO WAS AWARDED CUSTODY AMOUNT OF CHILD SUPPORT

11. The Respondent and I have been involved in the following cases in the Pulaski County Circuit Court:

Type of Case:

Domestic Abuse	Date(s):
Divorce	Date(s):
Paternity	Date(s):
Child Support	Date(s):
Other	Date(s):

I, the Petitioner/Affiant, state under oath and subject to the penalty of PERJURY that the above Petition and Affidavit for an Order of Protection and following Notice contain facts which are true and correct to the best of my knowledge and belief. I UNDERSTAND THAT IF I DO NOT RETURN TO THE SCHEDULED HEARING, THE PETITION AND AFFIDAVIT FOR AN ORDER OF PROTECTION PROBABLY WILL BE DISMISSED. I understand that if any of the above statements are later determined by the Court to be false, I may be assessed the costs of this action, including filing fees, Sheriff's service fees, and the Respondent's attorney's fees, if any.

DATE: _____

Petitioner's/Affiant's signature

VERIFICATION

STATE OF ARKANSAS COUNTY OF PULASKI

Subscribed and sworn to before me this _____ day of _____, 20____.

.....

Notary Public

My Commission Expires:

NOTICE

All persons filing a <u>Petition for Order of Protection</u> must provide as much of the following information as possible:

] [DOB		
First	Middle	Last	-	Sex	Race	MM/DD/YYYY	Height	Weight
Address:								
			[-	Ey	es	Hair	SS#	
			-	Phone #		e#	DL# and other ID#	
Employer:								
Caution								
Caution: □ Responder	nt nossesses a fi	rearm						
Responder	nt possesses a fi nt has a history		lence					
C Responde	nt possesses a fi nt has a history		lence					
Responder Responder		of extreme vio	lence					
Responder Responder	nt has a history	of extreme vio	olence					
Responder Responder	nt has a history	of extreme vio	lence					
Responder Responder	nt has a history	of extreme vio	lence					

□ Live together □ Current or past dating relationship

Other Relative (Explain)