

STATE OF INDIANA ) IN THE \_\_\_\_\_ COURT \_\_\_\_\_  
 ) SS: ( \_\_\_\_\_ DIVISION, ROOM \_\_\_\_\_)  
 COUNTY OF \_\_\_\_\_ )  
 CASE NO. \_\_\_\_\_

\_\_\_\_\_  
 Name of Minor Child, Petitioner )  
 \_\_\_\_\_, )  
 By Child's Next Friend, (**Your Name**) )  
 vs. )  
 \_\_\_\_\_, )  
 Respondent (**Person to be Restrained**) )

**PETITION FOR AN ORDER FOR PROTECTION AND REQUEST FOR A HEARING—Filed on Behalf of a Child**

**IMPORTANT: This is a public document and a copy of it will be placed in the Court's file. A copy may also be sent to the Respondent.**  
*(Check those which apply)*

**1. I am filing this Petition for a child. The child who needs protection is or has been a victim of domestic or family violence, a sex offense, stalking, a course of conduct involving repeated or continuing contact with the child that is intended to prepare or condition the child for sexual activity (as defined in Ind. Code § 35-42-4-13), or repeated acts of harassment, and I am that person's:**

- parent
- guardian
- other representative (*describe:* \_\_\_\_\_).

**2. What is the Respondent's relationship to the child who needs protection?**

a. The Respondent is a family or household member (*check only the line which best applies*):

- the Respondent is, or used to be my spouse and the child lived with us;
- the Respondent and I resided together in an intimate relationship and the child lived with us;
- the Respondent is a parent of the child;
- the Respondent is, or used to, date the child;
- the Respondent is, or has been, engaged in a sexual relationship with the child;
- the Respondent and the child who needs protection have a child in common;
- the Respondent and the child are related by blood or adoption. The Respondent is the child's \_\_\_\_\_;
- the Respondent and the child are, or used to be, related by marriage. The Respondent is the child's \_\_\_\_\_;

- the Respondent is, or used to be, the child's guardian;
- the Respondent is, or used to be, the child's custodian;
- the Respondent is, or used to be, the child's foster parent;
- the child who needs protection is a minor child of someone in one of the types of relationships described above.

***If Respondent is not a family or household member as indicated above, but Respondent has committed stalking, a sex offense, sex grooming, or repeated acts of harassment (check only the line below which best applies):***

- a.  the Respondent has committed stalking against the child who needs protection.
- b.  the Respondent has committed a sex offense against the child who needs protection.
- c.  the Respondent engaged in a course of conduct involving repeated or continuing contact with a child that is intended to prepare or condition a child for sexual activity (as defined by Ind. Code § 35-42-4-13).
- d.  the Respondent committed repeated acts of harassment against the child.

**3. How old is the Respondent? \_\_\_\_\_ years old.**

**4. Please list all cases (divorce, protection orders, paternity, guardianship, criminal, juvenile, civil) involving the Respondent, or the Child you have with the Respondent (attach additional sheets of paper if necessary):**

| Case Name | Case Number | County & State |
|-----------|-------------|----------------|
|           |             |                |
|           |             |                |
|           |             |                |
|           |             |                |

Continued on Attachment 4a.

**5. This case is filed in this county because:**

- a. the Respondent lives in this county.
- b. the incident(s) of domestic or family violence, stalking, sex offense, sex grooming, or harassment happened in this county.
- c. the child who needs protection lives in this county.
- d. the child's next friend lives in this county.

**6. If you are not represented by an attorney, fill in your public mailing address:**

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This address will not be kept secret, so you should use a mailing address that you feel comfortable having public. If the Court grants the order, you may be eligible to obtain a confidential address through the Attorney General's Address Confidentiality Program (ACP). Email the ACP at: [confidential@atg.state.in.us](mailto:confidential@atg.state.in.us)

to get information on how to participate in that program.

**7. The Respondent has committed the following act(s) of domestic or family violence, stalking, sex offense, sex grooming, or harassment (*check those which apply*):**

- the Respondent attempted to cause physical harm to the child who needs protection;
- the Respondent threatened to cause physical harm to the child who needs protection;
- the Respondent did cause physical harm to the child who needs protection;
- the Respondent placed the child who needs protection in fear of physical harm;
- the Respondent caused the child who needs protection to involuntarily engage in sexual activity by force, threat of force, or duress;
- the Respondent committed stalking against the child who needs protection;
- the Respondent committed a sex offense against the child who needs protection.
- the Respondent committed an act of animal cruelty by beating, torturing, mutilating, or killing a vertebrate animal without justification with an intent to threaten, intimidate, coerce, harass or terrorize a family or household member.
- the Respondent has engaged in a course of conduct involving repeated or continuing contact with a child that is intended to prepare or condition a child for sexual activity (as defined in Ind. Code § 35-42-4-13).
- the Respondent committed repeated acts of harassment against the child.

**8. Describe what happened in each of the above incidents including the date(s), place(s) and witnesses to each incident (*attach additional sheets of paper if necessary*):**

**Date of Incident #1:** \_\_\_\_\_

**Place of Incident:** \_\_\_\_\_

**Description of Incident:**

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**List the names of all of the people who were present during the incident. You must include your own name if you were present:**

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**Date of Incident #2:** \_\_\_\_\_

**Place of Incident:** \_\_\_\_\_

**Description of Incident:**

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List the names of all of the people who were present during the incident. You must include your own name if you were present:

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Date of Incident #3: \_\_\_\_\_

Place of Incident: \_\_\_\_\_

Description of Incident:

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List the names of all of the people who were present during the incident. You must include your own name if you were present:

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\_\_\_\_\_ Continued on Attachment 8a.

9. I am asking the Court to order the following relief (*check all which apply*):

**NOTE:** *The following requested relief may be granted immediately by the Judge without a hearing. However, if the petition is based on harassment alone, the relief may be granted ONLY after notice to the Respondent and after a hearing to be held within thirty (30) days.*

\_\_\_ Prohibit the Respondent from committing, or threatening to commit, acts of domestic or family violence, stalking, sex offenses against the child, or a course of conduct involving repeated or continuing contact with the child that is intended to prepare or condition the child for sexual activity and who needs protection;

\_\_\_ Prohibit the Respondent from committing, or threatening to commit, acts of domestic or family violence, stalking, or sex offenses against the family or household members of the child who needs protection. Their names are:

\_\_\_\_\_  
\_\_\_\_\_;

\_\_\_ Prohibit the Respondent from harassing, annoying, telephoning, contacting, or directly or indirectly communicating with the child who needs protection;

\_\_\_ Order the Respondent to stay away from the child's residence, school, place of employment, or other place, which is the \_\_\_\_\_, located at: \_\_\_\_\_;

\_\_\_ Order the Respondent to stay away from the following location(s) frequented by the family or household member(s) of the child, which may include a residence, school, or place of employment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_;

***Please complete:***

Please list all owners or lease signers at the Child's residence:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

***NOTE: The following requested relief may be granted immediately by the Judge, but the Court must hold a hearing within thirty (30) days. If the petition is based on harassment alone, the relief may be granted ONLY after notice to the Respondent and after a hearing to be held within thirty (30) days.***

\_\_\_ Evict the Respondent from the child's residence,  
which is located at: \_\_\_\_\_;

\_\_\_ Order the Respondent to give the child the possession and use of  
the following:

\_\_\_ The residence located at: \_\_\_\_\_;

\_\_\_ An automobile/other motor vehicle described as: \_\_\_\_\_

\_\_\_\_\_;

\_\_\_ Other necessary personal items, described as: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_;

\_\_\_ Prohibit Respondent from removing, transferring, injuring, concealing,  
harming, attacking, mistreating, threatening to harm, or otherwise disposing  
of the animal(s) listed below.

**Example**

**Name:**

**Max**

**Age/Type:**

**9 year old dog**

**Size/Breed:**

**Large 55 pound black lab**

**Description:**

**Black hair, pink collar**

**Animal 1**

Name: \_\_\_\_\_

Age/Type: \_\_\_\_\_

Size/Breed: \_\_\_\_\_

Description: \_\_\_\_\_

**Animal 2**

Name: \_\_\_\_\_

Age/Type: \_\_\_\_\_

Size/Breed: \_\_\_\_\_

Description: \_\_\_\_\_

**Additional animals listed on Attachment 9(a).**

\_\_\_ Order that I will have the exclusive possession, care, custody, or control of an  
animal(s) owned, possessed, kept, or cared for by myself, the Respondent, a  
minor child of myself or the Respondent, or any other family or household  
member listed below.

**Animal 1** Name: \_\_\_\_\_  
Age/Type: \_\_\_\_\_  
Size/Breed: \_\_\_\_\_  
Description: \_\_\_\_\_

**Animal 2** Name: \_\_\_\_\_  
Age/Type: \_\_\_\_\_  
Size/Breed: \_\_\_\_\_  
Description: \_\_\_\_\_

**Additional animals listed on Attachment 9(a).**

\_\_\_ Order the following additional relief necessary to provide for the child's safety and welfare and the safety and welfare of the child's family or household members:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

***NOTE: The following requested relief may be granted ONLY after notice to the Respondent and after a hearing to be held within thirty (30) days:***

- \_\_\_ Specify the arrangements for parenting time;
- \_\_\_ Require that parenting time be supervised by a third party;
- \_\_\_ Deny the Respondent parenting time;
- \_\_\_ Order the Respondent to pay the Petitioner's or child's attorney fees;
- \_\_\_ Order the Respondent to pay rent for the child's residence;
- \_\_\_ Order the Respondent to make payment on a mortgage for the child's residence;
- \_\_\_ Order the Respondent to pay support for the child, or for minor child(ren) in common with the child who needs protection;
- \_\_\_ Order the Respondent to reimburse the Petitioner and/or the child who needs protection for expenses related to the domestic or family violence, stalking, sex offense, sex grooming or harassment as follows

***(specify the amount for each expense and bring documentation of the expense with you to Court for the Hearing):***

\_\_\_ Medical expenses: \$ \_\_\_\_\_  
\_\_\_ Counseling: \$ \_\_\_\_\_  
\_\_\_ Shelter: \$ \_\_\_\_\_  
\_\_\_ Repair or replacement of  
damaged property: \$ \_\_\_\_\_  
\_\_\_ Other costs or fees the Petitioner or child  
has as a result of bringing this case: \$ \_\_\_\_\_

- \_\_\_ Prohibit the Respondent from using or possessing a firearm, ammunition, or deadly weapon;
- \_\_\_ Order the Respondent to surrender the following firearm(s), ammunition, or deadly weapon(s) to a specified law enforcement agency (***list each item***

*below and attach an additional sheet of paper if necessary):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_;

\_\_\_\_\_ **Continued on Attachment 9b.**

\_\_\_\_\_ Order a wireless service provider to transfer to me the right to continued use of, and financial responsibility for, the following telephone number(s) used by a minor child in my custody:

Telephone Number and User: \_\_\_\_\_  
Wireless Service Provider: \_\_\_\_\_  
Current Account Holder: \_\_\_\_\_

Telephone Number and User: \_\_\_\_\_  
Wireless Service Provider: \_\_\_\_\_  
Current Account Holder: \_\_\_\_\_

**Additional telephone numbers listed on Attachment 9(c)**

*NOTE: A wireless service provider's normal requirements for setting up a new cellular telephone account still apply. You should consider whether you will be able to set up an account in your own name and whether you will be able to pay for the account.*

**10. Number of pages attached:** \_\_\_\_\_

By filing this Petition, I am respectfully requesting that the Court immediately issue an Ex Parte Order for Protection. I understand that, if I have asked for relief from the Court regarding any of the following:

- evicting the Respondent from the child's home;
- giving the child the possession of personal property;
- giving me possession of an animal;
- prohibiting Respondent from taking action against an animal;
- establishing rules for child parenting time;
- requiring the Respondent to pay fees, expenses, or child support;
- forbidding the Respondent from possessing a firearm, ammunition, or a deadly weapon;
- ordering the Respondent to surrender firearm(s), ammunition, or deadly weapons; or
- allowing me or a child in my custody to continue to use a telephone number that I will be financially responsible for;

I must also ask the Court to set a date for a Hearing within thirty (30) days of today's date.

I understand that if the petition is based on harassment alone, the Court may grant relief ONLY after notice to the Respondent and after a hearing to be held within thirty (30) days.

I understand that if a Hearing is set, and if I fail to appear for the Hearing, the Court may terminate the Ex Parte Order and/or dismiss the case.

I affirm, under the penalties for perjury, that the foregoing representations are true:

- a. on the basis of my own personal knowledge.
- b. on the basis that I have been informed and believe that the facts stated are true. *(NOTE: If this Petition is made solely on the basis of Petitioner's information and belief, Petitioner must attach affidavits by one or more persons who have personal knowledge of the facts stated.)*

DATE: \_\_\_\_\_

\_\_\_\_\_  
PETITIONER - Type or print name of child

\_\_\_\_\_  
Signature of child's next friend