This form is approved by the Illinois Supreme Court and is required to be accepted in all Illinois Circuit Courts. STATE OF ILLINOIS, **PETITION FOR CIRCUIT COURT** ORDER OF PROTECTION COUNTY **Civil Proceeding Criminal Proceeding** For Court Use Only **Instructions ▼** Directly above, enter Petitioner: the county where (First, middle, last name) **Case Number** you filed this case. Enter your name as ٧. Independent Petitioner. Juvenile Enter name of the Respondent: **Other Civil Proceeding** person you are (First, middle, last name) Criminal seeking protection from as Respondent. Enter the Case People to be Protected by this Order (check all that apply): Number given by the Petitioner refers to any protected person in this Order. Circuit Clerk. Petitioner Check the boxes for Petitioner's minor children with Respondent: ALL people you want to include in the Order. On the lines Petitioner's minor children not related to Respondent: provided, enter the name for each person you are trying to protect. Dependent adult: "Other household High-risk adult: members" includes people living with Other household members: you or working where you are staying. If you are completing this form for a minor child, dependent adult, or high-risk adult, insert information needed below as if you NOTE: were that person. Do not use your information, except as directed at the bottom of page 10 where you will sign this form. TYPE OF ORDER OF PROTECTION REQUESTED AGAINST RESPONDENT (check all that apply) Check either or both boxes for the type of Emergency Order of Protection (civil case)/ Ex Parte Protective Order (criminal case) order you want. If you (These short-term Orders of Protection can be granted on the same day you file your Petition need protection today, without advance written notice to Respondent because advance notice would cause more abuse). check the first one. Plenary Order of Protection (civil case)/Final Protective Order (criminal case) (These long-term Orders of Protection can only be granted at a court hearing after advance In background information 1, enter written notice to Respondent.) the address and email **BACKGROUND INFORMATION** (if you have one) If Respondent should not know household address because it may cause more abuse, where you want to receive Court notices. use this address for Court notices: If you do not want Respondent to know Street Address, Apt. # City State ZIP where you live, enter a different address Email where you can get OR mail. If you do not want Respondent to Respondent knows household address and it is: know your email, enter a different email ZIP Street Address, Apt. # City State where you can get Court notices. If you do not have another Email email, leave this blank. GETTING COURT DOCUMENTS BY EMAIL: You should use an email account that you do not share with anyone else and that you check every day.

GETTING COURT DOCUMENTS BY EMAIL: You should use an email account that you do not share with anyone else and that you check every day If you do not check your email every day, you may miss important information, notice of court dates, or documents from other parties.

In 2, if you do not know Respondent's date of birth or Respondent's home or work address, write "do not know."	2.	Respondent's Information Respondent's date of birth: Respondent's home address: Respondent's work information:	Street Add	ress, Apt # Cit	y State	ZIP
		Employer	Street Add	ress Cit	y State	ZIP
In 3, check all the boxes that describe your relationship to Respondent.	3.	Petitioner's Relationship to Res Boyfriend / Girlfriend / Dating Relationship (including ex) (BG)	□ enc	check all that apply) ouse (SE)	☐ Ex-Spouse (〉	(S)
For example, if you are requesting an Order of Protection		Have Children with Respondent (never married to Respondent) (CC)	☐ Sha	aring or Shared Home	Child (CH)	
against your mother, you will check the box next to "Child"		Parent (PA)	□ Bro (SB	ther / Sister / Sibling)	Other Family	Member (OF)
because you are the child of the		Other – Petitioner not Related to Respondent (OT)	O 🔲 In-la	aw (IL)	Personal Car Disabled Peti	
Respondent.		Petitioner with Disability receives care from respondent (PD)		sonal Assistant of itioner (PR)	Grandchild (C	GC)
		Grandparent (GP)	☐ Ste	p-Child (SC)	Step-Brother Step-Sibling (/ Step-Sister / (SS)
		Prospective or Adoptive Child has Family or Household Relationship with Respondent	☐ Hou	ter Child has Family o usehold Relationship n Respondent	or Custodian	nted Guardian of a Child who or Household with
Answer Sections 4		Step-Parent (SP)			, , , , , , , , , , , , , , , , , , ,	
and 5 the best you can. If you check 'yes' but do not know some of the information asked		Is there now, or has there ever involving Petitioner? Your Young Yes, list information about the	es 🗌 1	ther <i>Order of Protec</i> No	-	t Respondent
for, then write "do not know."		Names of People Involved		State & County		Year
If you need more room, check the box, fill out the <i>Additional</i>						
Case Information form, and file it with		☐ I have listed additional case				
this <i>Petition</i> . In 5 , list all other	5.	Is there now, or has there ever Petitioner?	been, ano	ther court case with	Respondent involv	ing
types of court cases that you have been		Yes No Do not	know If	yes, list information	about the cases:	
involved in with Respondent, such as		Type of Case		State & County		Year
divorce, custody, child support,						
parentage, parenting time, guardianship,		☐ I have listed additional case	e informati	on on the <i>Additional</i>	Case Information f	orm.
adoption, and abuse and neglect cases.	6.	This <i>Petition</i> may be filed in this	county be	ecause (check all that	t apply):	
In 6, check all boxes		Petitioner resides here.Respondent resides here.				
that are true.		The abuse happened here.				
		Petitioner fled here to avoid				

Enter the Case Number given by the Circuit Clerk:

				Enter the C	asa Numb	er given by the Circuit Clerk:	
In 7, start with what happened most recently. Enter the date and time and describe what happened. Be as specific about dates and times as you can. You can include any past abuse and any criminal convictions	7.			<i>n</i> is needed	because	Respondent did these things: What happened:	
that resulted. If you don't remember exact dates of things that happened long ago, just enter the month and year.		Date:		_ Time:		_What happened:	
		Date:		_ Time:		_What happened:	
If you need more		Date:		_ Time:		_What happened:	
room, fill out the Additional Incidents of Abuse form or your own extra pages and file it with this Petition.		☐ I have at	ttached t	he <i>Additiona</i>	al Inciden	<i>ts of Abuse</i> form or my own ex	ktra pages.
In 1, check box 1 and each box below for the type of abuse you	PR	OTECTIONS I 1. No Abus Responde	е			er or commit the following acts of	of abuse towards

In 1, check box 1 and each box below for the type of abuse you want to prevent. If you are unsure what the words after the boxes mean, you can look at definitions on the last page of this form.

Petitioner (check all that apply):

Harassment Intimidation of a Dependent
Physical Abuse Exploitation of a High-Risk Adult with Disabilities
Stalking Neglect of a High-Risk Adult with Disabilities
Willful Deprivation Interference with Personal Liberty

1	=			Enter the Case Num	ber given by the Circuit	CIEIK.	
Check 2 if you want	□ 2.	Posse	ssion of Res	sidence (check a d	or b)		
Respondent to stay				•	ns the property, or	nly who gets to use	or occupy it.
away, at all times,					ossession of the re	=	• =
from your home or provide you			_	tay or be at the re		siderioe and respe	machi be
alternative housing.				•			
G1 1 A 10	-	Ш	Petitioner s	residence is locat	ed at:		
Check 2a if you want Respondent to stay			Street Addres	ss Ant#	City	Stat	e ZIP
away from your		OR		55. Api #	City	Stat	e zir
home. If you listed					laaad		
your address on page				address is undisc	iosea.		
1, check the first box under 2a and enter			JSE (check or	•			
your address. If you				•	e residence and R	•	-
did not list your		Pet	titioner and R	espondent both h	ave a right to occu	py the residence b	ut it would be
address on page 1, check the second box		har	rder on Petitio	oner to leave.			
under 2a. Under		OR					
BECAUSE, check		b. Re	spondent be	ordered to provide	e, and stay away fr	om, alternate hous	ing for
the reason why			-		arties share a resid		=
Respondent should not be allowed to stay at the place you are				dent and/or a hearin		`	
living. Check 2b if	□ 3.	Stav A	way from Pe	etitioner and Cer	tain Places (see bo	ox below)	
you want Respondent		_	_	ered to (check all th		,	
to provide you different housing.				mmunication with			
In 3, read the	-		-	Petitioner at all tir			
information in the							
box below and make					ner, Respondent must r o not communicate with		
sure that is what you want. If so, check box					ge, telephone and cell p		
3 and each box below					and all other communic		This also includes
that applies.	contac	t or com	nunication throu	igh others who may n	ot know about the Ord	er of Protection.	
In 3a, check if you		a. Re	spondent be	ordered not to be	or stay at any of the	following places w	hile Petitioner
want Respondent to stay away from		is tl	here:				
places you need to			Places of e	mployment of Peti	tioner, located at:		
go.							
NOTE: Respondent			Name	Street Addre	ess	City State	ZIP
will see these			-				
addresses. If you do not want Respondent			Name	Street Addre	ess	City State	ZIP
to know where the			Schools, kir	ndergartens, or da	ycare centers of P	etitioner. located a	t:
children go to				ga, e ae	.,	,	
school, do not list it. Instead, check the			Name	Street Addre	ess	City State	ZIP
box and fill out the							
Confidential Name &			Name	Street Addre	ess	City State	ZIP
Location of the School or Childcare			☐ I have g	given the name ar	nd location of the so	chool or childcare p	provider on
Provider form, and			the Cor	nfidential Name &	Location of the Sci	hool or Childcare F	<i>Provider</i> form.
file it with the							
Circuit Clerk as "confidential."							
confidential.			Other locati	one.			
			Other locati	0113.			
			Name	Street Addre	ess	City State	ZIP
	_		Name	Street Addre	ess	City State	ZIP
Fill in 3b only if		b. Sch	hool Restriction	ons			
Respondent attends the same school as						is an elemen	tary, middle, or
Petitioner.		Sch	nool Name				

high school attended by both Respondent and Petitioner for whom protection is sought.

			Enter the Case Num	ber given by	the Circuit Clerk:		
		Responden	t be ordered (check on	e):			
		☐ Not to a	attend Petitioner's sch	ool for as l	ong as Petitione	er is enrolled the	re;
		☐ To acce	ept a change of placer	nent or pro	ogram at Petitio	ner's school, as	determined
		by the i	public school district o	r by a priva	ate or non-public	c school; OR	
			be present in these pa		•	,	
			oo procont iir arece pa				
		-					
In 3c, if Respondent is	☐ c.	Requiremen	nts for Parents and Gu	ardians			
a minor, include the name of Respondent's	_	•	t is a minor. To ensure		pondent follows	this Order. Resi	ondent's
Parent or Guardian, if		Parent or G		'	•	, ,	
you know it.			Name of Pa	rent or Gua	ardian		
		be ordered	to:				
Check 4 if you want							
Respondent to get	☐ 4. Cou	unseling (ava	ailable ONLY after actua	l notice to F	Respondent and/o	r a hearing with th	ne judge)
evaluation and treatment and all the		Responden	t be ordered to partici	oate in the	following (check	(all that apply):	
boxes under it that		☐ A Dom	estic Violence Partner	Abuse pro	ogram.		
apply to your case.		☐ An alco	hol and substance ab	use evalua	ation and to suc	cessfully comple	ete all
NOTE: A judge can		recomn	nendations.				
only order counseling at a hearing where		☐ A ment	al health evaluation ar	nd to succ	essfully complet	e all recommend	dations.
Respondent is present		_					
or has been given							
formal written notice.							
Petitioner:]	Fill out Section	on 5 only if you have ch	ildren you	nger than 18 wit	h Respondent.	
In 5a , enter the names			ession of Children			•	<u>.</u>
of all children under		a. Respor	ndent and Petitioner ar	e both the	parents of these	e minor children:	
age 18 that you and Respondent have		•			State of	Included as a	Drotostad
together.	Ch	nild's Name <i>(fir</i>	st. middle. last)	Age	Residence	Perso	
Check the box after		,	,,,			☐Yes	□No
each child if you want						☐Yes	□No
to protect them from Respondent.						☐Yes	□No
Respondent.						Yes	□No
In 5b , check the boxes		h Darart	ago of the Children			LITES	
that apply to your			age of the Children				
children with			rties are NOT married	and parer	itage HAS NOT	been establishe	ed.
Respondent.		OR					
			age HAS been establis		, ,		
		_	e children of the partie			•	of the
		par	ties, or within 300 day	s of termir	nation of the ma	rriage.	
		☐ The	e parties are NOT mar	ried but pa	arentage HAS b	een established	by one or
Check 5c and check		mo	re of the following:				
the box for the person who takes care of the		1	Both parties have sig	ned a Voli	intary Acknowle	dament of Pate	rnity (VAP)
children most of the		1.			•	•	• , ,
time. If the primary		^	(if both parties' names a		лин с е птисате, во	ui parues signed t	ille VAP)
caretaker of the			A court or administra				
children is someone other than you or		3.	Other:				
Respondent, check the							
box for "Other							
person" and enter that		c The pri	mary caretaker of the	minor child	dren is <i>(check on</i>	e):	
		c. The pri	mary caretaker of the	minor child	dren is <i>(check on</i>	e):	

	Enter the Case Number given by the Circuit Clerk:
Check 5d if you are	Respondent
protecting children you have with	Other person:
Respondent. Check	Name
the boxes that apply to	
your case and fill in the information.	Street Address, Apt # City State ZIP
If you do not want	d. Care and Possession of Children
Respondent to know where the children go	Petitioner requests the following (check all that apply):
to school, check the	Petitioner be granted physical care and possession of the minor children.
last box and fill out	Respondent be ordered to return the minor children to the physical care
the Confidential Name	of Petitioner or another person,
& Location of the School or Childcare	Respondent be ordered to not remove the minor children from the physical
Provider form, and	care of Petitioner or from a school or childcare provider.
file it with the Circuit	·
Clerk as "confidential."	☐ I have given the name and location of the school or childcare provider on
confidential.	the Confidential Name & Location of the School or Childcare Provider form.
Petitioner:	Fill out Sections 6 - 7 only if you have children younger than 18 with Respondent.
Check 6 , if you want significant decision-	6. Temporary Significant Decision-Making Responsibility (formerly custody)
making responsibility	(available ONLY after actual notice to Respondent and/or a hearing with the judge)
(formerly custody).	☐ Petitioner requests temporary significant decision-making responsibility for the minor
	children.
	7. Respondent's Parenting Time (formerly visitation) with the Minor Children
	Petitioner requests that the court order parenting time as follows (<i>check a, b, c, or d</i>):
In 7, check box a, b,	a. GRANT parenting time for Respondent without restrictions (if granting, fill out schedule
c, or d to let the court	below in part 7e).
know if, how, and	☐ b. RESERVE parenting time until a later hearing (this means the Court will not make
when Respondent should have parenting	any decisions on parenting time right now). (If you checked RESERVE, skip to Section 8.)
time.	c. DENY parenting time for Respondent (no visits at all). (If you checked DENY, check
Check 7b if you do	your reasons below, then skip to Section 8).
not want parenting time decided now,	 d. RESTRICT parenting time for Respondent (Visits with limits. Check your reasons below, then fill out the schedule below in 7e.)
then skip to 8.	If you chose DENY or RESTRICT, check your reasons below.
If you checked 7c or	Respondent is likely to (check all that apply):
7d, check all reasons	Abuse or endanger the children during parenting time.
that apply.	
	Use parenting time to abuse or harass Petitioner, Petitioner's family, or
	household members.
	Improperly hide or detain the children.
	Act in a way that is not in the best interest of the children.
In 7, If you checked GRANT or	If you chose GRANT or RESTRICT, request your parenting time schedule below:
RESTRICT and you	e. Respondent's parenting time should be (check 1 or 2):
want Respondent to	1. See attached parenting time schedule; OR
have parenting time, complete 7e. If you	2. The following parenting time schedule (check all that apply):
know what the	Every from to Time Time
schedule should be,	
either attach it and	Each weekend OR Every other weekend as follows (include am or pm):
check 7e1 or pick your parenting time	from Friday atto Saturday at
schedule in 7e2. Enter	☐ from Friday at to Sunday at
when, where, and	from Saturday at to Saturday at
how you want parenting time to	from Saturday at to Sunday at
happen and fill in the	from Sunday at to Sunday at
blanks with specific	to Guilday at
times, days, and other information. Include	Parenting time is to begin on:
miormation, illelade	<u> </u>

information. Include a.m. or p.m.

OP-P 403.4

Date

OP-P 403.4

Page 6 of 11

(08/21)

		Holidays:			
				from:	to:
Enter the name of the person who will be				Time	Time
responsible for transportation during parenting time.	Ш	Name	for transportation of the chil	dren for parenting ti	me is:
Enter the name or address of the place		Pickup for parenting time	e to take place at:		
where pickup and return will take place.		Name of place (if any)	Street Address	City	State
Enter the address of the place where the parenting time will		Return from parenting ti	me to take place at:		
take place.		Name of place (if any)	Street Address	City	State
If you want an individual to supervise parenting time, enter		Parenting time will take	place at:		
that person's name on the line. The Affidavit		Name of place (if any)	Street Address	City	State
of Parenting Time Supervisor form must		Parenting time will be su	pervised by: Name of Supe	ervisor	
be completed and signed by the supervisor. This			an <i>Affidavit of Parenting Tim</i> and acknowledging account	ne Supervisor form v	with the court
Affidavit is not required if an agency		Parenting time will be su	ipervised at an official super	vised visitation cent	ter <i>(if available)</i> .
or center is supervising.		Respondent to return the Immediately at the end of	e children to Petitioner or the parenting time.	e person designated	d by Petitioner
In 8, check if you are afraid Respondent will hide your children or take them out of state.		Concealment or Removes	ral of Children to hide the children or remov	ve them from Illinois	
In 9, check if Respondent has your children and you want them to be with you.		•	opear in court with the childrect, removal or concealment		
		To permit a court-ordered	ed interview or examination of	of the children or Re	espondent.
Check 10a if you want your things protected from Respondent. List things you want to			Property (check all that apply) possession of this property:		
keep with you. Check 10b if					
Respondent has some or all of the property you listed in 10a. List the things you want back. Check all boxes below that apply to	□ b.	Respondent be ordere	d to give Petitioner this prop	erty:	
your case.					
	— Е [_	spondent, owns the property		ıt Petitioner

Enter the Case Number given by the Circuit Clerk: _

			Enter the Case Number given by the Circuit Clerk:
In 10c, check if you			at risk for abuse or is not practical. Not having the property would be harder on
have things that Respondent may need			Petitioner.
immediately. Then		П	The parties are married and a divorce case
check the boxes that			
fit your case and list any other items.		C.	Respondent be awarded possession of:
In 10d, check if			other personal property(<i>list</i>):
Respondent can enter			
the residence one time to get their			
things.		d.	Respondent be given the right to enter the residence only one time to retrieve
Check 10e if you			their property, but only in the presence of law enforcement or another person
checked 10b or 10c . Enter the address			named below.
where you want the		e.	Transfer of Personal Property
transfer to happen.			Property to be transferred at:
In 10f, check who			
you want to be there when it happens and			Street Address, Apt # City State ZIP
enter that person's		f.	Property to be transferred in the presence of (check one):
name. It may be safer if the transfer is in the			Law enforcement:
presence of a law			Name of law enforcement agency
enforcement officer.			to be arranged with law enforcement.
Enter the date and		Ш	Another person: Name
time you want to			Transfer Date: Time:
transfer these things.			
Check 11 if you want	11.	Res	strictions on Property
your things protected		Res	spondent be ordered not to take, damage, or otherwise dispose of this property:
from Respondent and list what you want			
protected. Then,			
check all the boxes below the lines that		BE	CAUSE (check one):
apply to your case.			Petitioner, but not Respondent, owns the property.
Check Restrictions on			Petitioner and Respondent both own the property. Not having the property would
Resources to stop			be harder on Petitioner.
Respondent from using an elderly			The parties are married and a divorce case has has not been filed.
person's money or		Da	striction on Decourage of an Eldonly Detitionary
property for themselves.	Ш		striction on Resources of an Elderly Petitioner
			spondent be ordered not to use financial or other resources of an elderly Petitioner for benefit of Respondent or any other person.
In 11.5, check to	44 E		session of Animals
protect your pets from Respondent.	11.5		
In 12, check if you		rei	itioner be awarded possession of these animals:
want Respondent to		Nar	ne and description of each animal
give you money to	40	_	
help you or children you have together. If	12.		nporary Support (available ONLY after actual notice to Respondent, and/or a hearing
you have it, bring			the judge, check all that apply)
proof of income to the next court date.		Res	spondent be ordered to pay support as follows:
			Respondent pay temporary maintenance (formacily collect an event are discount)
In 13, check all boxes that apply to your		Ш	Respondent pay temporary maintenance (formerly called spousal support or alimony)
case. If you know,	13.	Par	ment for Losses because of Abuse (available ONLY after actual notice to Respondent)
enter the amount of the cost in the blank.	10.		or a hearing with the judge, check all that apply)
If you are not sure,			spondent be ordered to pay Petitioner for losses caused by abuse, neglect, or
you can estimate. Bring receipts,	Ш		loitation, including:
including proof of			Medical expense\$
		ш	<u>Ψ</u>

	1	Enter the Case Number given by the Circuit Clerk:	
payment, and		Lost earnings	\$
estimates of repairs to court if you have		Repair or replace property damaged or taken	\$
them.		☐ Moving and other travel expenses	. \$
NOTE: A judge can		Reasonable expenses for housing other than a domestic violence	
only order economic		sheltershelter	\$
remedies be awarded at a hearing where		Expenses for search and recovery of children	
Respondent is present		Reasonable attorney's fees	· · · · · ·
or has been given		Other:	\$
formal written notice.			
If you checked any	☐ 14.	. No Entry or Presence Under Influence	
box in Section 2 or one of the first two		Respondent is allowed at the Petitioner's residence, but cannot be or stay	y there
boxes in Section 3,		while under the influence of drugs or alcohol. This would be a threat to the	e safety or
you cannot check box		well-being of Petitioner or Petitioner's children.	
14.			
In 14.5, check if you		F FIDE ADMO () I'M ONLY &	
want to ask for guns to be taken away and	<u> </u> 14.	.5 FIREARMS (available ONLY after actual notice to Respondent and/or a hearing	
Respondent is a		Respondent is a current or former intimate partner of the Petitioner and re	
current intimate		to the physical safety of Petitioner or Petitioner's child. Respondent should be	e ordered
partner of Petitioner and represents a		to turn over all firearms in their possession.	
threat to the physical		In addition, Respondent (check all that apply):	
safety of Petitioner or Petitioner's child.		Has a history of violence.	
Then check all boxes		Has a history of violence. Has a history of possession or use of firearms.	
that fit your case.		Carries a firearm on their person or in a vehicle.	
NOTE: A judge can			
NOTE: A judge can		Make and model of vehicle:	
only order guils to be		May be a threat to the sefety of the public or police officer	
only order guns to be taken away at a		☐ May be a threat to the safety of the public or police officer.	
taken away at a hearing where		☐ May be a threat to the safety of the public or police officer.☐ Is now, or has been, suicidal.	
taken away at a			
taken away at a hearing where Respondent is present			
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do	☐ 15	☐ Is now, or has been, suicidal.	
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do not want Respondent		☐ Is now, or has been, suicidal.	cords,
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do	☐ 15	☐ Is now, or has been, suicidal. 5. Children's Records	
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do not want Respondent to get your children's school records or other records. These	☐ 15	Is now, or has been, suicidal. Children's Records Respondent should not be allowed to access, inspect, or obtain school records	all that apply):
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do not want Respondent to get your children's school records or other records. These records could provide	□ 15	Is now, or has been, suicidal. Children's Records Respondent should not be allowed to access, inspect, or obtain school rechealthcare records, or any other records of the children BECAUSE (check	all that apply):
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do not want Respondent to get your children's school records or other records. These records could provide Respondent with your protected address.	☐ 15	☐ Is now, or has been, suicidal. 5. Children's Records Respondent should not be allowed to access, inspect, or obtain school rechealthcare records, or any other records of the children BECAUSE (check ☐ Petitioner is requesting that Respondent not be allowed to have core	all that apply): ntact with the
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do not want Respondent to get your children's school records or other records. These records could provide Respondent with your protected address. Check all boxes that	☐ 15	☐ Is now, or has been, suicidal. 6. Children's Records Respondent should not be allowed to access, inspect, or obtain school rechealthcare records, or any other records of the children BECAUSE (check) ☐ Petitioner is requesting that Respondent not be allowed to have comminor children.	all that apply): ntact with the
taken away at a hearing where Respondent is present or has been given formal written notice. In 15, check if you do not want Respondent to get your children's school records or other records. These records could provide Respondent with your protected address.	☐ 15	 ☐ Is now, or has been, suicidal. Children's Records Respondent should not be allowed to access, inspect, or obtain school rechealthcare records, or any other records of the children BECAUSE (check ☐ Petitioner is requesting that Respondent not be allowed to have comminor children. ☐ The actual address of Petitioner is not included in this Petition due to 	all that apply): ntact with the o the risk of
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after "Because."

	Enter the Case Number given by the Circuit Clerk: BECAUSE:
n 18, check if you re on Respondent's rell phone plan and you want to separate your account. Enter the provider name and elephone numbers.	☐ 18. Telephone Services A wireless telephone provider should transfer from Respondent to Petitioner the right to continue to use their own telephone numbers and be responsible for the cost of them. Petitioner, or a minor child in Petitioner's custody, uses the telephone numbers. Provider: Name of Account Holder: Billing Phone #:
	Petitioner's Phone #s:
	Petitioner's Phone #s:
Under the Code of Civil Procedure, 735 LCS 5/1-109, making a statement on this form that you know to be false is perjury, a Class 3 Felony.	I certify that everything in the <i>Petition for Order of Protection</i> is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under 735 ILCS 5/1-109.
of you are completing this form on a computer, sign your name by typing it. If you are completing it by nand, sign and print your name.	Petitioner Signature Petitioner Name
If prepared by someone other than Petitioner, that person should enter their name, address, phone number, and email address.	Prepared by: Street Address: City, State, ZIP: Phone Number: Email: Attorney # (if any):

DEFINITION OF TERMS USED IN THIS PETITION

These definitions are incorporated in and made a part of the *Petition* to which they are attached.

- 1. **Abuse:** "Abuse" means physical abuse, harassment, intimidation of a dependent, interference with personal liberty or willful deprivation but does not include reasonable direction of a minor child by a parent or person in loco parentis.
- 2. **Adult with Disabilities**: "Adult with Disabilities" means an elder adult with disabilities or a high-risk adult with disabilities. A person may be an adult with disabilities for purposes of this Act even though he or she has never been adjudicated an incompetent adult. However, no court proceeding may be initiated or continued on behalf of an adult with disabilities over that adult's objection, unless such proceeding is approved by his or her legal guardian, if any.
- 3. **Elder Adult with Disabilities**: "Elder adult with disabilities" means an adult prevented by advanced age from taking appropriate action to protect himself or herself from abuse by a family or household member.
- 4. **Exploitation:** "Exploitation" means the illegal, including tortious, use of a high-risk adult with disabilities or of the assets or resources of a high-risk adult with disabilities. Exploitation includes, but is not limited to, the misappropriation of assets or resources of a high-risk adult with disabilities by undue influence, by breach of a fiduciary relationship, by fraud, deception, or extortion, or the use of such assets or resources in a manner contrary to law.
- 5. **Family or Household Members:** Include spouses, former spouses, parents, children, stepchildren and other persons related by blood or by present or prior marriage, persons who share or formerly shared a common dwelling, persons who have or allegedly have a child in common, persons who share or allegedly share a blood relationship through a child, persons who have or have had a dating or engagement relationship, persons with disabilities and their personal assistants, and caregivers as defined in Section 12-4.4a of the Criminal Code of 2012. For purposes of this paragraph, neither a casual acquaintanceship nor ordinary fraternization between two individuals in business or social contexts shall be deemed to constitute a dating relationship. In the case of a high-risk adult with disabilities, "family or household members" includes any person who has the responsibility for a high-risk adult as a result of a family relationship or who has assumed responsibility for all or a portion of the care of a high-risk adult with disabilities voluntarily, or by express or implied contract, or by court order.
- 6. **Harassment:** "Harassment" means knowing conduct which is not necessary to accomplish a purpose that is reasonable under the circumstances, would cause a reasonable person emotional distress, and does cause emotional distress to Petitioner. Unless the presumption is rebutted by a preponderance of the evidence, the following types of conduct shall be presumed to cause emotional distress:
 - a. creating a disturbance at Petitioner's place of employment or school; or
 - b. repeatedly telephoning Petitioner's place of employment, home or residence; or
 - c. repeatedly following Petitioner about in a public place or places; or
 - d. repeatedly keeping Petitioner under surveillance by remaining present outside his or her home, school, place of employment, vehicle or other place occupied by Petitioner or by peering in Petitioner's windows; or
 - e. improperly concealing a minor child from Petitioner, repeatedly threatening to improperly remove a minor child of Petitioner's from the jurisdiction or from the physical care of Petitioner, repeatedly threatening to conceal a minor child from Petitioner, or making a single such threat following an actual or attempted improper removal or concealment, unless Respondent was fleeing an incident or pattern of domestic violence; or
 - f. threatening physical force, confinement or restraint on one or more occasions.
- 7. **High-risk Adult with Disabilities:** "High-risk adult with disabilities" means a person aged 18 or over whose physical or mental disability impairs his or her ability to seek or obtain protection from abuse, neglect, or exploitation.
- 8. **Interference with Personal Liberty:** "Interference with personal liberty" means committing or threatening physical abuse, harassment, intimidation or willful deprivation so as to compel another to engage in conduct from which she or he has a right to abstain or to refrain from conduct in which she or he has a right to engage.
- 9. **Intimidation of a Dependent:** "Intimidation of a dependent" means subjecting a person who is dependent because of age, health or disability to participation in or the witnessing of: physical force against another or physical confinement or restraint of another which constitutes physical abuse as defined in this Act, regardless of whether the abused person is a family or household member.
- 10. Neglect: "Neglect" means the failure to exercise that degree of care toward a high-risk adult with disabilities which a reasonable person would exercise under the circumstances and includes but is not limited to:
 - a. the failure to take reasonable steps to protect a high-risk adult with disabilities from acts of abuse; or
 - b. the repeated, careless imposition of unreasonable confinement; or
 - c. the failure to provide food, shelter, clothing, and personal hygiene to a high-risk adult with disabilities who requires such assistance; or
 - d. the failure to provide medical and rehabilitative care for the physical and mental health needs of a high-risk adult with disabilities; or
 - the failure to protect a high-risk adult with disabilities from health and safety hazards.

Nothing in this definition shall be construed to impose a requirement that assistance be provided to a high-risk adult with disabilities over his or her objection in the absence of a court order, nor to create any new affirmative duty to provide support to a high-risk adult with disabilities.

- 11. **Petitioner:** "Petitioner" may mean not only any named petitioner for the order of protection and any named victim of abuse on whose behalf the petition is brought, but also any other person protected by this Act.
- 12. **Physical Abuse:** "Physical abuse" includes sexual abuse and means any of the following:
 - a. knowing or reckless use of physical force, confinement or restraint; or
 - b. knowing, repeated and unnecessary sleep deprivation; or
 - c. knowing or reckless conduct which creates an immediate risk of physical harm.
- 13. **Stalking:** "Stalking" means knowingly and without lawful justification, on at least two (2) separate occasions, following another person or placing the person under surveillance or any combination thereof and:
 - at any time transmitting a threat of immediate or future bodily harm, sexual assault, confinement or restraint and the threat is directed towards that person or a family member of that person; or
 - b. placing that person in reasonable apprehension of immediate or future bodily harm, sexual assault, confinement or restraint; or
 - placing that person in reasonable apprehension that a family member will receive immediate or future bodily harm, sexual assault, confinement, or restraint.
- 14. **Willful Deprivation:** "Willful deprivation" means willfully denying a person who because of age, health or disability requires medication, medical care, shelter, food, therapeutic device, or other physical assistance, and thereby exposing that person to the risk of physical, mental or emotional harm, except with regard to medical care or treatment when the dependent person has expressed an intent to forego such medical care or treatment. This paragraph does not create any new affirmative duty to provide support to dependent persons.