

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

PETITIONER (protected person))
Birthdate: _____)
 Petitioner is a child. Who is signing for the child?) CASE NO. _____
Name: _____ DOB: _____) *[The court will fill in this line]*
Relationship to child: _____)
v. _____)
RESPONDENT (restrained person))
Birthdate (estimate age if unknown): _____)
 Respondent is or appears to be a minor _____)

**PETITION FOR
SEXUAL ASSAULT
PROTECTIVE ORDER**
(for non-DV cases only**)

I swear or affirm under penalty of perjury that all the information I provide in this petition is true to the best of my knowledge and belief.

1. I request the following protective order(s).

If there is any chance you will need protection for more than 20 days, you should request both an ex parte (20-day) order and long-term (one-year) order by checking both boxes.

- an ex parte protective order (20-day order).

[This order can take effect immediately based on only the petition and Petitioner's testimony, before Respondent knows about the ex parte petition. If the ex parte order is granted, the police will serve it on Respondent. If the ex parte order is denied but the court still sets a hearing on your request for a long-term order, the police will serve Respondent a copy of this petition and notice of the long-term hearing date.]

I certify that I

- have **not** tried to notify Respondent that I am filing this petition.
 notified or tried to notify Respondent as follows:

- a long-term protective order (one-year order).

[This order can only be issued after notice to Respondent and a court hearing. This order will last for one year, unless the court ends it sooner. The police will notify Respondent of the hearing.]

2. Respondent is a: [check all that apply]

- | | |
|--|---|
| <input type="checkbox"/> (former) friend | <input type="checkbox"/> neighbor, landlord, or tenant (not living together) |
| <input type="checkbox"/> classmate | <input type="checkbox"/> legal guardian of Petitioner |
| <input type="checkbox"/> client or former client | <input type="checkbox"/> correctional facility (jail), police, or probation officer |
| <input type="checkbox"/> co-worker or employer | <input type="checkbox"/> teacher or school coach |
| <input type="checkbox"/> other (describe): _____ | |
- I do not know and have never been acquainted with Respondent

****If you are related to Respondent by blood, adoption, or marriage, or have ever (1) been in a dating or romantic relationship with Respondent, (2) lived with Respondent, or (3) had a child with Respondent, file a domestic violence petition ([DV-100](#)) instead of this form. Sexual assault is one of the qualifying crimes of domestic violence.****

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3. Respondent has sexually assaulted me as described below.

[Be as specific as you can, including what actions Respondent did and why these actions were without your consent or otherwise criminal. Include dates and places if known. It may be difficult to write about, but it is important for the judge to have as many details as possible to make a decision on your petition. You may find it helpful to read the definitions in the text box below before you begin writing. Attach additional pages if necessary—write only on one side of the page.]

[This is a plain language summary of the sexual assault statutes. For the complete text, see AS 11.41.410-450.]

"Sexual assault" includes (but is not limited to) sexual penetration or sexual contact:

- without your consent
 - after you were coerced into giving consent (for example: you were threatened with violence if you said no)
 - when you were not able to give consent (for example: due to incompetency, being unconscious or asleep, being under the influence of drugs or alcohol)
 - when you were unaware of the sexual act (for example: during a medical exam)
 - by a jail employee, Dept. of Family and Community Services employee, probation/parole officer, or police officer when you were under that person's supervision, guardianship, or custody; or under arrest or detention
 - if you were younger than 13 years old
 - if you were younger than 16 years old and the respondent is more than four years older than you
 - when you were 16 or 17 years old and the respondent had a position of authority over you (for example: a guardian, teacher, religious leader, employer, or coach)

"Sexual penetration" means vaginal, anal, or oral sex; or inserting any body part or object into your genitals or anus.

"Sexual contact" includes (but is not limited to) touching your genitals or anus, causing you to touch the respondent's genitals or anus, or causing you to come in contact with semen.

4. A protective order is necessary to keep me safe because:

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5. I request an order from the court directing: [check all that apply]

- a. Respondent not to have sexual contact with me.
- b. Respondent not to follow, approach, confront, watch, or stalk me in any other way, or threaten to do so.
- c. Respondent not to contact me by telephone, text message, e-mail, social media messaging, U.S. mail, or otherwise communicate directly or indirectly by any means with me or the following members of my household:
-

- d. Respondent to stay away from my residence.

Is this also Respondent's current residence? yes no

Does Respondent know where you live? yes no I don't know

Do you want your residence to remain confidential from Respondent? yes no

[Important: only list your address on the line below if you want it written on the protective order as a place for Respondent to stay away from. Your address will **not be confidential if it is listed on the court order.]**

My residence address: _____

Respondent's residence is:

- unknown to me
 in the same building as my residence
 approximately _____ feet miles from my residence

Describe or give address: _____

- e. Respondent to stay away from the following places I go:

<u>Place</u>	<u>Street Address</u>	<u>Distance to Stay Away</u>
<input type="checkbox"/> My school	_____	<input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/> Respondent also goes to school here.	_____	_____
<input type="checkbox"/> My child(ren)'s school	_____	<input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/> Respondent also has a child or children at this school.	_____	_____
<input type="checkbox"/> My job	_____	<input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/> Respondent also works here.	_____	_____
<input type="checkbox"/>	_____	<input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/>	_____	<input type="checkbox"/> ft. <input type="checkbox"/> mi.
<input type="checkbox"/>	_____	<input type="checkbox"/> ft. <input type="checkbox"/> mi.

Exceptions: _____

- f. Other protections requested:

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6. Open court cases, in this or another state, involving me or Respondent (that I know of):

<u>Type of Case</u>	<u>Court Location</u>	<u>Petitioner or Respondent</u>
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Respondent has these other court cases that I want the court to know about:

<u>Type of Case</u>	<u>Court Location</u>
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****Both Petitioner and Respondent must tell the court of any court cases involving either of you that arise while a petition for protective order is pending. AS 18.65.865(d).****

7. Respondent information (if known):

Respondent's full legal name and any nicknames or other names used:

Respondent's mailing address: _____

Respondent's home phone: _____ Work phone: _____

Respondent's email address: _____

8. Petitioner information:

*[The court needs your mailing address to send you court papers, including notices of hearing. If you believe it is not safe for Respondent to know where you live, write a safe "message" address where you can be sure you will receive court papers. **If you do not have an address, email, and telephone number that can safely be revealed to Respondent, ask the court clerk how you can provide this information so that it will be kept confidential and not revealed to Respondent.** Civil Rule 65.1.]*

My (safe) mailing address: _____

My (safe) message phone: _____

My (safe) email address: _____

My full legal name: _____

Any nicknames or other names: _____

[A notary public, court clerk, or other authorized person must fill out the section below after watching you sign. If you do not have access to any of these people, attach Self-Certification (form [TF-835](#)).]

Petitioner's Signature

Print Name

Subscribed and sworn to or affirmed before me at _____, Alaska on _____.

Court clerk, notary public, or other authorized person
My commission expires: _____

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CONFIDENTIAL LAW ENFORCEMENT INFORMATION SHEET

Notice to Petitioner: You must supply the respondent's name and birth date, if known. Give as much information as possible. This information will NOT be given to the respondent.

Notice to Law Enforcement: This information is confidential and supplied to assist you in serving the protective order. After serving (or failing to serve) the order, notify petitioner and complete the return of service section on the DV-125.

A. PETITIONER INFORMATION

Full name: _____ Date of birth: _____ Petitioner is a child.

Petitioner's residence address: _____

Is this the address respondent is to stay away from? Yes No

Do you want to be notified when respondent is served? Yes No

Contact phone(s): cell _____ other _____ Email: _____

Is it safe for the court to leave messages on this cell? Yes No On the other phone? Yes No

Is it safe for the court to send paperwork about this case to the email address above? Yes No

List any specific times in the next 3 days when you are **NOT** available for the judge to call you for a hearing:

B. RESPONDENT INFORMATION

Full name: _____ Nicknames: _____ Respondent is a child.

Residence Address: _____

Is this the address respondent is to stay away from? Yes No Last four digits of SSN _____

Other Addresses: _____

Contact phone(s): cell _____ other _____ Email: _____

Where is respondent now (what street address)? _____ Other information about respondent:

Friends / relatives / phone numbers / hangouts:	
Hazards at respondent's home (dogs, traps, guns):	
Describe respondent's house: <input type="checkbox"/> log <input type="checkbox"/> frame <input type="checkbox"/> apartment <input type="checkbox"/> single family <input type="checkbox"/> duplex <input type="checkbox"/> 1 story <input type="checkbox"/> 2 story <input type="checkbox"/> 3+ story <input type="checkbox"/> main color _____ <input type="checkbox"/> trim color _____ Garage: <input type="checkbox"/> separate <input type="checkbox"/> attached <input type="checkbox"/> none 4x4 needed to access address? <input type="checkbox"/> Y <input type="checkbox"/> N	
Sex _____ Race _____ *Date of Birth* _____ HT _____ WT _____ Hair _____ Eyes _____ State ID / Driver's Lic. # _____ ST _____ Other Identifiers (facial hair, scars, tattoos, etc.) _____	

Respondent's employer _____	Respondent's vehicle information Make _____ Model _____ Plate No. _____ State _____ Year _____
Employer address _____	<input type="checkbox"/> van <input type="checkbox"/> pickup <input type="checkbox"/> canopy <input type="checkbox"/> camper <input type="checkbox"/> toolbox <input type="checkbox"/> car <input type="checkbox"/> 2 door <input type="checkbox"/> 4 door <input type="checkbox"/> SUV <input type="checkbox"/> other _____
Work phone _____	Other vehicles respondent is known to drive: _____
Work hours _____	
Respondent's position _____	
Supervisor _____	

C. OFFICER SAFETY INFORMATION

Previous contact with police by respondent? No Yes Explain: _____

Any threats by respondent toward petitioner, family, police? Describe: _____

Weapons accessible to respondent (pistol, rifle, knife, other): _____

Expected mental state or history of respondent (include alcohol or drug use): _____

Is a divorce or other legal action pending that involves the respondent (child custody, eviction, bankruptcy, repossession of property)? _____

Draw a map on a separate sheet of blank paper if it will help law enforcement.