

No address, email and telephone are given because I do not want my information on this petition.

\_\_\_\_\_  
Full Name of Party Filing Document

\_\_\_\_\_  
Mailing Address (Street or Post Office Box)

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email Address (if any)

IN THE DISTRICT COURT FOR THE \_\_\_\_\_ JUDICIAL DISTRICT  
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF \_\_\_\_\_  
MAGISTRATE DIVISION

\_\_\_\_\_  
Petitioner  
(Person Seeking Protection Order),  
  
vs.  
  
\_\_\_\_\_  
Respondent  
(Person You Want Restrained)

Case No. \_\_\_\_\_

SWORN PETITION FOR PROTECTION ORDER

Select:

Domestic Violence (I.C. § 39-6304)

Stalking and/or Threats (I.C. § 18-7907)

**THE LAW REQUIRES THAT THE RESPONDENT BE GIVEN A COPY OF THIS COMPLETED FORM AND ALL ATTACHMENTS.**

**1. Protected Person(s).** I am seeking a protection order for:

Myself.

The following minor child/ren (first and last names): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

My relationship to child/ren is:  Custodial parent  Non-custodial parent  Guardian

The following family or household member (first and last names): \_\_\_\_\_

\_\_\_\_\_

**2. Relationships.** Please check all that apply to the relationship between Respondent (person you want restrained) and you or the person(s) for whom you are seeking protection.

- spouse
- former spouse, state and county where divorce was filed: \_\_\_\_\_
- residing together
- previously resided together, we last resided together on (date) \_\_\_\_\_
- child in common
- intimate partner
- parent
- related by blood, adoption or marriage, Relationship: \_\_\_\_\_
- are dating, or  previously dated and our last date was (date) \_\_\_\_\_

**If a dating relationship please describe:** (complete for adult or minor):

Length of time of the dating relationship \_\_\_\_\_

Time since the relationship ended \_\_\_\_\_

Other, Explain: \_\_\_\_\_

**3. Residence.**

I live or am staying in \_\_\_\_\_ County, Idaho. Respondent lives in \_\_\_\_\_ County, State of \_\_\_\_\_.

Respondent does not live with me.

I live with Respondent at:

\_\_\_\_\_

Our home is rented or owned  by both of us  by me  by Respondent.

I have left the residence where I lived with Respondent. I want to return  yes  no.

**If yes,**  to live  to get personal belongings  other \_\_\_\_\_

A business is run from the home. Type of business: \_\_\_\_\_

The business is run  by me  by Respondent  by both of us.

**4. Child/ren affected by the protection order.**

I am the natural/adoptive parent or legal guardian of the following child/ren:

Name (First, Middle Initial, Last)	Birth Date	Sex	How Child is Related to:		State(s) where child lived last 6 months
			Petitioner	Respondent	

During the last six (6) months the child/ren have lived with \_\_\_\_\_

\_\_\_\_\_

**5. Other court cases.** List any pending court cases between you and Respondent and any other court cases or court orders relating to the minor child/ren who will be affected by this protection order (divorce, custody, child protection, guardianship, adoption, protection order, criminal, no contact order, etc.)

\_\_\_\_\_

I have applied for a protection order(s) before in the county of \_\_\_\_\_  
on (date) \_\_\_\_\_, against (name) \_\_\_\_\_

Respondent has applied for a protection order(s) before in the county of \_\_\_\_\_  
on (date) \_\_\_\_\_, against (name) \_\_\_\_\_

Respondent has been involved in crimes involving violence, child abuse, weapons, drugs or alcohol. (If checked, please describe the charges to the best of your knowledge, when and where they were filed, and any convictions) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I have been involved in crimes involving violence, child abuse, weapons, drugs or alcohol. (If checked, please describe what the charges were, when and where they were filed and convictions) \_\_\_\_\_

\_\_\_\_\_

**6. I am filing for a protection order for: (check all that apply)**

**Domestic Violence**

**Definition:** Physical injury, sexual abuse or forced imprisonment or threat thereof of a family or household member, or of a minor child by a person with whom the minor child has had or is having a dating relationship, or of an adult by a person with whom the adult has had or is having a dating relationship.

**Stalking**

**Definition:** Repeated acts, of nonconsensual contact that alarms, annoys, or harasses you, causing you emotional distress, fear of death, physical injury or fear of death or physical injury of a family or household member. The recent act must have occurred within the last 90 days.

**Telephone Threats**

**Definition:** The use of a telephone with the intent to terrify, threaten, or intimidate and threatens to inflict injury or physical harm against you or a family member. The conduct must have occurred within the last 90 days.

**Threats Based on Race, Color, Religion, Ancestry or National Origin**

**Definition:** Based upon your race, color, religion, ancestry, or national origin, Respondent intimidates or harasses you or causes, or threatens to cause, physical injury to you or damage to your personal property. The conduct must have occurred within the last 90 days.

**Describe the most recent acts and/or threats committed by Respondent.**

When? (date and time)

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Where did this occur or where were you?

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Who was present? (minor children, friends, family, etc.)

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Describe in detail the series of or recent acts or threats and describe how you were contacted (e.g. phone, email, social media). If you include attachments, please explain how your attachments are related to the acts or threats:\_\_\_\_\_

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\_\_\_\_\_ Include a separate page if you need more room.

Describe any injuries:

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Was a weapon involved?  No  Yes

If so, what and how? \_\_\_\_\_

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Is there anything else you want the judge to know about what happened?

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Describe past acts or threats including dates:

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**Do not write on the back of this page.  
Include a separate page if you need more room.**

7. I ask the Court to order the following:

**a. Personal Conduct Order.**

Respondent shall not contact or attempt to contact the protected person(s) identified in Section 1 of this petition, in any manner, including in person or through another person, or in writing or through any electronic means, including telephone, email, text, through social networking, or facsimile. Respondent shall not harass; stalk; threaten; use, attempt to use or threaten use of physical force; or engage in any other conduct that would place the protected person(s) in reasonable fear of bodily injury.

**b. Stay Away Order.**

i. Respondent shall at all times stay away from:

My residence at:

\_\_\_\_\_

**No address is given because I do not want my address on this petition.**

Protected Minor's residence at:

\_\_\_\_\_

My workplace and/or school at:

\_\_\_\_\_

Protected Minor's workplace and/or school at:

\_\_\_\_\_

My child/ren's school and/or childcare at:

\_\_\_\_\_

Other: \_\_\_\_\_

ii. Are any of these addresses within 1,500 feet of where Respondent lives, works, or attends school?  No  Yes, Please explain the distance and circumstances:

\_\_\_\_\_

\_\_\_\_\_

**c.  Move-out Order.**

Respondent shall move from the residence at: \_\_\_\_\_

\_\_\_\_\_

and take from the dwelling only items needed for employment and necessary personal effects (at peace officer's discretion).

**d.  Child Custody.**

Stay the same as ordered in an existing child custody/divorce decree

(Case #, County): \_\_\_\_\_

Temporary custody of the minor child/ren named in Section 4 above, be awarded to:

me

Respondent.

The other parent should have:

Visitation as follows (list specific days and times)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Neutral drop off and pick up location at:

\_\_\_\_\_

Transportation provided by \_\_\_\_\_

Supervised visitation, why and supervised by whom \_\_\_\_\_

\_\_\_\_\_

No visitation.

**e.  Treatment/counseling.**

Respondent be ordered to participate in treatment or counseling services for (purpose)

\_\_\_\_\_  
\_\_\_\_\_

**f.  Other relief requested:**

\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION UNDER PENALTY OF PERJURY**

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
Typed/printed name

\_\_\_\_\_  
Signature