

Print neatly. Use dark ink.  
You may want to write your answers on scratch paper and then transfer them

IN THE IOWA DISTRICT COURT FOR \_\_\_\_\_ COUNTY  
*(name of the county where you are filing this petition)*

	:	
	:	
	:	Civil No. _____
	:	<i>(leave blank - Clerk of Court will fill in)</i>
Plaintiff,	:	
<i>(person desiring domestic</i>	:	
<i>abuse protective order)</i>	:	
vs.	:	<u>PETITION</u>
	:	
	:	FOR RELIEF FROM
	:	DOMESTIC ABUSE
	:	
Defendant.	:	
<i>(alleged domestic abuser)</i>	:	
	:	Code Ch. 236

The Plaintiff states:

1. This action is being filed under Iowa Code chapter 236.
2. I (Plaintiff) now live in \_\_\_\_\_ County, Iowa.
3. I (Plaintiff) can receive mail at the following address: *(any of the following addresses may be used: your mailing address, the mailing address of a shelter or other agency, a public or private post office box, any other mailing address, with permission of the resident of that address)*

<i>Number, Street</i>	<i>City, State</i>	<i>Zip Code</i>	<i>County</i>
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4. Defendant lives at the following address *(if known)*:

<i>Number, Street</i>	<i>City, State</i>	<i>Zip Code</i>	<i>County</i>
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5. Defendant works at the following *(if known)*: \_\_\_\_\_

*Employer*

<i>Number, Street</i>	<i>City, State</i>	<i>Zip Code</i>	<i>County</i>
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6. Is defendant 17 years of age or younger *(if known)*? No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, what is defendant's date of birth? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

7. Give the name and age of each child under age 18 whose welfare may be affected by the controversy.

Name	Birthdate	Name	Birthdate
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

8. Relationship of plaintiff and defendant at the time of the abuse or threat of abuse:

(mark only one box)

- |  |  |
|--|--|
| <input type="checkbox"/> Married   | <input type="checkbox"/> Living together   |
| <input type="checkbox"/> Separated   | <input type="checkbox"/> Lived together within one year<br>of the assault, but not at the<br>time of the assault           |
| <input type="checkbox"/> Divorced  | <input type="checkbox"/> Intimate relationship*  |
| <input type="checkbox"/> Adult relatives living together                           | <input type="checkbox"/> Have been in an intimate relationship<br>and have had contact within one year<br>of the assault * |
| <input type="checkbox"/> Parents of the same minor<br>(under 18) child or children |  |

\* An "intimate relationship" means a significant romantic involvement that need not include sexual involvement. An intimate relationship does not include casual social relationships or associations in a business or professional capacity.

**(NOTE: If none of these boxes accurately describes your relationship, do not complete this form. Contact an attorney and/or call the police about your abuse.)**

9. Nature of the alleged domestic abuse: (mark all that apply)

- Defendant has physically abused me
- Defendant has sexually abused me
- Defendant has threatened me and I fear for my physical safety

10a. Describe the most recent injury, and/or nonconsensual (*against your will*) sexual experience, and/or threats. Please include how it happened, where it happened, and when you were hurt or threatened:

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b. Describe any other injuries or threats you have received from the defendant. Please include how you were hurt or threatened, where it happened and when it happened:

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Mark this box  if additional 8 ½ x 11 sheets are attached.

**If the plaintiff and defendant have no children in common (biological or adopted) under age 18, skip questions 11 through 18.** Questions 11-18 relate to the Uniform Child-Custody Jurisdiction Act and to the court's duty under Iowa Code § 236.5(2)(d) (1993). If you are unsure how to answer these questions, contact a lawyer for advice.

11. Who should have temporary custody of the minor children you have in common with the defendant?  
 \_\_\_ Me (Plaintiff)      \_\_\_ Defendant      \_\_\_ Other (please specify) \_\_\_\_\_

12. How will your safety and your children's safety be affected by the court's decision about temporary custody or temporary visitation? (please explain)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. If you want custody, provide suggestions for how the defendant could visit the children without contacting you -- for example, through friends, relatives, or baby-sitters. List concerns you have about visitation:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

14. List the minor children (under age 18) you have in common with the defendant. (Give each child's name, address and birthdate. If children are living in a shelter or other safe place, give only the county and state where they are living.)

Name	Present Address (or county/state)	Birthdate
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

15. If the children have lived with other people during the last five years, list those other persons and places:

Child's name	Person(s) child lived with	Address at that time	From when to when
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Attach additional sheets if necessary to account for each child's living situations over the last five years.)

16. Give the present address of each adult listed in question 15, above:

Person(s) child lived with (other than you)	Present Address
_____	_____
_____	_____

17. Has there ever been any court case concerning custody of the minor children you have in common with the defendant in Iowa or any other state? No \_\_\_ Yes \_\_\_  
 (If "Yes", explain: \_\_\_\_\_.)  
 \_\_\_\_\_.)

18. Do you (plaintiff) know of any other person who has physical custody of the minor children or claims to have custody or visitation rights with respect to the children? No \_\_\_ Yes \_\_\_  
 (If "Yes", explain: \_\_\_\_\_.)  
 \_\_\_\_\_.)

Mark this box  if additional 8 1/2 x 11 sheets are attached.

You can get two kinds of orders. A short-term order lasts until a hearing is held (within 15 days). A long-term order lasts up to one year, and is issued only after a full hearing. You can ask for either or both types of orders.

**I AM ASKING THE COURT TO DO THE FOLLOWING:**

**I REQUEST THAT THE JUDGE** immediately issue an EMERGENCY and/or a TEMPORARY Protective Order(s) to protect me before the hearing because I am in present danger of domestic abuse. I request that the judge order the defendant to: *(mark all that apply)*

- stop domestic abuse
- stay away from my home/the family home
- stay away from my work or school
- not contact me either personally or through another person, whether by telephone, writing or any other way.
- give me temporary possession of the family home or provide other housing
- give me temporary possession of the family car  
*(specify make, model, year, if known \_\_\_\_\_.)*
- give me temporary custody of the children, with appropriate visitation for defendant
- give me temporary financial support
- other *(please specify):* \_\_\_\_\_

**I REQUEST THAT THE JUDGE** set a hearing on this Petition; direct the Sheriff to serve the defendant a copy of this Petition along with a copy of the Order for Hearing; and, following the hearing, issue a Protective Order (effective for up to one year). I request that the judge order the sheriff to serve the defendant with a copy of any Protective Order issued. I request that the judge grant any relief authorized by law, including ordering the defendant to: *(mark all that apply)*

- stop domestic abuse
- stay away from my home/the family home
- stay away from my work or school
- not contact me either personally or through another person, whether by telephone, writing or any other way.
- give me possession of the family home or provide other housing
- give me possession of the family car  
*(specify make, model, year, if known \_\_\_\_\_.)*
- give me temporary custody of the children, with appropriate visitation for defendant
- give me financial support
- take part in counseling
- other *(please specify):* \_\_\_\_\_

IF YOU CHANGE YOUR MIND about any of these requests, you must tell this to the judge at the hearing which you will have five to fifteen days after you file this petition. You may cancel any of the requests you make in this Petition. Or you may also ask the judge to grant you any of the requests even if you did not mark them on this Petition.

**READ BEFORE SIGNING.** When you file this Petition you are setting into motion several legal matters. Please check each statement below after you have read it.

\_\_\_\_\_ **I understand** that there will be a court hearing five to fifteen days after I file this Petition.

\_\_\_\_\_ **I understand** that a law enforcement officer will give the defendant a copy of this Petition, if the defendant can be found, and that the defendant will receive other relevant court papers.

\_\_\_\_\_ **I understand** that I must attend the hearing. If I change my mind and do not want a Protective Order, I should fill out and file with the clerk of court a "MOTION TO DISMISS" before the scheduled hearing. *[This form can be picked up at the Clerk of Court's Office.]*

If you do not attend the hearing, or file a "Motion to Dismiss," the judge could allow the defendant to present testimony and might give the defendant what he/she asks for, such as custody of the children or the home. If you file a motion to dismiss, the judge can dismiss the Temporary Protective Order so that it will no longer have any effect.

\_\_\_\_\_ **I understand** that the hearing is my opportunity to tell the judge how I was hurt or threatened, where it happened and when it happened. I can bring people with me to the hearing who saw the defendant abusing me or saw the injuries. I can bring any evidence that I have which shows that I have been abused, such as medical reports, pictures, pulled hair, or anything else that might help convince the judge that I need a Protective Order.

\_\_\_\_\_ **I understand** that the court will give primary consideration to the safety of me and my children. I should tell the judge how we will be in danger if the defendant is given temporary custody or unrestricted visitation.

\_\_\_\_\_ **I understand** that the hearing is my opportunity to tell the judge if paying court costs would hurt my ability to pay for my needs or my children's needs. I should be ready to provide financial information at the hearing, such as income and living expenses and other expenses.

\_\_\_\_\_ **I understand** that the Protective Order could be in effect for up to one year. **I also understand** that if the Protective Order is granted, it may be extended beyond one year by filing for an extension prior to the expiration of the Order.

\_\_\_\_\_ **I understand** that if I believe that the Protective Order has been violated, I can bring this to the court's attention by filling out and filing with the clerk of court an "AFFIDAVIT TO START CONTEMPT PROCEEDINGS." *[This form can be picked up at the Clerk of Court's Office.]*

\_\_\_\_\_ **I understand** that if a Protective Order is issued, peace officers can use every reasonable means to enforce the Protective Order, including taking the defendant into immediate custody, and that if a court finds that the defendant has violated the Protective Order, the defendant could be put in jail and have to pay a fine. **I also understand that I could be arrested and jailed for aiding and abetting defendant's violation of the protective order.**

\_\_\_\_\_ **I understand** that a Protective Order is a serious legal action. If I want to change any part of the Protective Order, I should go back and tell the judge. I should fill out and file with the clerk of court a "REQUEST TO CANCEL OR CHANGE A CHAPTER 236 PROTECTIVE ORDER." *[This form can be picked up at the Clerk of Court's Office.]*

**IMPORTANT CONFIDENTIAL NOTICE**

Pursuant to Iowa Code section 236.10, this file is a public record and accessible by anyone. If you would like all or part of this file to remain confidential to the general public in order to protect the safety or privacy of any person, then you must request the court to seal all or part of this file.\* The person from whom you are seeking relief will have access to the file, even if it is sealed. Mark one or more of the following if you want this file sealed:

- I request all portions of this file to be sealed.
- I request that my county of residence and mailing address be sealed.
- I request that the names and addresses of my children or wards be sealed.
- Other request: *(please specify)*: \_\_\_\_\_

\* Court orders and support payment records cannot be sealed. The court may, upon request, order that address and location information be redacted from those records.

STATE OF IOWA )  
 ) ss:  
 COUNTY OF \_\_\_\_\_ )  
*[name of county where Notary Public is located]*

I, \_\_\_\_\_, the plaintiff named above, have read the above Petition and the information provided is true and accurate to the best of my knowledge.

\_\_\_\_\_  
 PLAINTIFF ***[Sign only in front of a Notary Public]***

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Notary Public

YOU MAY WANT TO OR SHOULD SEE A LAWYER  
 if you don't know how to answer the questions on this Petition  
 if you think the defendant will hire a lawyer  
 if you think the defendant will try to get custody of the children  
 You are allowed to involve a lawyer in this process at any time, though you are not  
 nd gives

FOR OTHER GENERAL INFORMATION ABOUT DOMESTIC ABUSE, CALL THE  
 (CONFIDENTIAL) IOWA DOMESTIC ABUSE HOTLINE: 1-800-942-0333

