

PROTECTIVE ORDER GUIDELINES

- Keep a copy of the protective order with you at all times.
- Save an electronic copy on your phone.
- Make multiple copies of the protective order and give it to anyone who needs to know about it (i.e. employer, school, family, neighbors, etc.). Educate them that they can call law enforcement if the Respondent violates the order.
- Keep a log of any potential violations.
- Report any potential violations to law enforcement.
- Feel free to contact our office if you have any questions about how to work with law enforcement regarding any possible violations.
- If you have an address change while the protective order is in force, you must contact our office to have the protective order amended.
- If the Respondent is in custody (in jail or prison) when the protective order expires, contact our office to obtain documentation showing that the protective order has been extended.
- If you still need to deal with other family legal issues (such as child custody or divorce), contact a family lawyer or a legal service agency to help you with those issues.

Read your protective order for a list of prohibitions. Your order should list and/or describe locations where the Respondent cannot go. Depending on the type of order you have, some contact may be permitted as long as it is not harassing or threatening.

WHAT HAPPENS NEXT – PROTECTIVE ORDER PROCESS

IMPORTANT: Our office will not represent you on the protective order if another family case (i.e. custody, divorce) is open while the protective order case is pending. You need to talk to the attorney representing you in that matter about filing the protective order.

Exception: Attorney General Child Support Cases can be open.

Attorney Review / Filing / Service

- An attorney with our office will review your Protective Order Intake Application.
- If the attorney approves filing, a Protective Order Application will be filed in District Court.
- Our office will contact you as soon as possible, usually within 48 hours from receiving the Protective Order Intake Application, to let you know if your application has been accepted, declined or if we need any more information.
- Our office usually requests a Temporary Protective Order to be in place until the hearing date. The judge decides whether or not to grant the Temporary Protective Order.
- The law requires that the Respondent (the person we are filing against) must be personally served with both notice of the hearing and the Temporary Protective Order. **They also receive a copy of the Affidavit.** Personally served means that the process server must give the Protective Order papers directly to the Respondent. If the Respondent cannot be personally served, we cannot move forward with the Protective Order.
- You will be required to come to court for a hearing to obtain the 2-year protective order.
- You will receive a letter from our office informing you of your court date. If you do not receive a letter within 2 weeks, please call our office. If your mailing address changes, please notify our office.

Court – Things to Know Ahead of Time

- Court begins at 1:00 p.m. We ask that you meet in our office at 12:45.
- Make arrangements for any children (i.e. picking up from school, etc.) in case you are in court all afternoon.
- Do not bring children under the age of 18, unless you have been advised by our office to bring them as a witness.
- If you have any witnesses, please bring them to court with you.
- If you have any evidence (i.e. photos, recordings, medical records, emails, etc.) you have not already given to us, please bring it to court.

Court Process

- During court you may sit in the courtroom, out in the hallway, or in our office. If you would like for someone from our office to sit with you, please let us know.
- There will be various criminal and family law cases being addressed in court, and our attorneys will be busy resolving several matters, but we will keep you informed about what is happening with your case.
- When the Judge calls your case, you will be escorted by one of our attorneys to the bench.

Case Resolutions

- The type of hearing depends on whether or not the Respondent is in court and is contesting or agreeing to the order.
- You will be asked to testify about the information in your affidavit. The lawyers and/or judge may ask you questions.
- The judge decides whether or not to grant your Protective Order, who is covered under the order, and certain conditions of the order.
- Generally, we try to resolve your case on your court date, however, your case could be carried to another day due to time constraints or if more information is needed.

AFFIDAVIT

THE STATE OF TEXAS
COUNTY OF NEWTON

§
§

I, _____, Applicant, for a Protective Order against
_____ Respondent do certify that I have read and understand the following:

A Protective Order is a civil legal action, which I am requesting the Newton County Criminal District Attorney to bring against the Respondent.

The C.D.A.'s Office is not going to settle property or other disputes, but is only going to request those things which are necessary to protect me and my household from family violence. This may include removing the Respondent from my house for up to two (2) years. If the Respondent is removed from the house, that will be a condition of the order which neither the Respondent nor I may violate. There may be orders entered allowing visitation of the children by the other legal party, and I may be subject to contempt of court action if I disobey those orders. I am not asking for a Protective Order to circumvent such orders.

A Temporary Protective Order will be requested to protect me until the hearing. No orders are effective until the Respondent is served with notice of this action. If I cannot provide a good address for service, this suit will be refused.

At the hearing we may be able to enter an Agreed Protective Order, which will make testifying at the hearing unnecessary. Both the Respondent and I will be bound by the terms of the Agreement, or any court order entered as a result of the filing of this lawsuit.

I will be required to come to court on my hearing date, and my failure to appear may result in any of the following:

The application may be dismissed;

An order with which I may not agree could be entered in my absence;

I may be subpoenaed or brought to court by a Deputy upon issuance of a writ of attachment.

I understand that the State of Texas is filing this action based on my sworn affidavit and that I am a witness in this case. I agree to testify in this matter if called upon, even if I no longer wish to pursue the Protective Order at that time.

I understand a Protective Order could be effective for up to two (2) years.

I understand that the statements I make in this Application or to the Judge are sworn to and the Texas Penal Code, §37.03, makes it a third-degree felony offense to knowingly or intentionally make false statements about material facts in an official proceeding. I understand the consequences of falsifying any information or for bringing this suit for any reason other than for my or my family's protection. I will cooperate with the Newton County Agencies assisting me in this action.

I, the undersigned, state under oath that I am the Affiant, that I have personal knowledge of the facts and circumstances stated herein and they are TRUE and CORRECT to the best of my knowledge and belief.

AFFIANT

Verification

Sworn to and subscribed before me the undersigned authority on this _____ day of _____, 20__.

Notary Public, State of Texas

PROTECTIVE ORDER SCREENING FORM

Name: _____ D.O.B.: _____

Address: _____

Mailing Address (if different): _____

Phone #: Home: _____ Work: _____ Cell: _____

Race: _____ Sex: _____ Referred by: _____

Emergency Contact: Name: _____ Phone: _____

E-Mail: _____

Respondent's Name: _____

Address: _____

RELATIONSHIP TO RESPONDENT(circle one):

Married Divorced Separated (How long?) _____

Intimate Partners Other Family Relationship Other: _____

1. Have you ever been involved in a Protective Order before? Y / N
 - a. When? _____ Where? _____
 - b. Were you the Applicant or the Respondent? _____
2. Do you have an Emergency Protective Order against the Respondent at this time? Y / N
 - a. If so, when was it issued? _____
3. Do you want the Respondent ordered to stay away from you? Y / N
4. Will you take the necessary steps to comply with any Court Order entered in this case, including reporting all violations to proper authorities? Y / N
5. Do you understand that it takes approximately 14 days to obtain a final protective order and it requires at least one court appearance? Y / N
6. Do you understand that once the Court signs an order you can not let the Respondent violate the order? Y / N
7. Do you understand that once the Court signs an order you must personally appear before the judge if you want the order modified or vacated? Y / N
8. Has Child Protective Services ever removed a child from your custody? Y / N
9. Are you currently working with a Child Protective Services caseworker? Y / N
10. Do you currently have a divorce OR a Suit Affecting Child Parent Relationship pending against the Respondent? Y / N
11. Do you have any pending felony or misdemeanor criminal charges against you? Y / N

PROTECTIVE ORDER INTAKE APPLICATION

TODAY'S DATE: _____

Are your addresses confidential? Y / N Are your phone numbers confidential? Y / N

Your Information (Applicant)

Name: _____

Last

First

Middle

Maiden/Other

Race: ____ Sex: ____ Birth Date: ____ / ____ / ____ Driver's License No.: _____

Social Security No.: _____ Safe E-Mail: _____

Address: _____ City: _____

County: _____ Zip: _____

Home Phone: ____ / ____ / ____ Cell Phone: ____ / ____ / ____

Work Phone: ____ / ____ / ____

What number is best/safest to reach you on? Home / Cell / Work

Employer: _____ Occupation: _____

Work Address: _____ City: _____ Zip: _____

Emergency Contact: 1.) _____

Name

Relationship to You

Phone Number

2.) _____

Name

Relationship to You

Phone Number

The Person You Want to File Against (Respondent)

Name: _____

Last

First

Middle

Alias/Nickname

Race: _____ Sex: _____ Birth Date: ____ / ____ / ____ Driver's License No.: _____

Social Security No.: _____ Marital Status: _____

Address: _____ City: _____

County: _____ Zip: _____

Home Phone: ____ / ____ / ____ Cell Phone: ____ / ____ / ____

Work Phone: ____ / ____ / ____

Employer: _____ Occupation: _____

Work Address: _____ City: _____ Zip: _____

Where else might Respondent be found? _____

Who else lives there? _____

Describe the Respondent

Height: ___' ___" Weight: _____ lbs. Build: _____ Eye Color: _____

Hair Color/Style: _____ Skin Tone: _____

Describe any tattoos, birthmarks or scars: _____

Glasses [] Beard [] Mustache [] Goatee [] Missing Teeth [] Gold Teeth []

Citizen?: Y / N If no, where is the respondent from? _____

Vehicle Information - Year: _____ Model: _____ Make: _____

Color: _____ Condition: _____ License Plate #: _____

Has the Respondent ever been arrested / convicted for anything before? Y / N

What? _____

Is the Respondent currently on Probation or Parole? Y / N Where? _____

For what? _____

Does the Respondent have any active warrants? Y / N For what? _____

Is the Respondent currently on active duty in the Military? Y / N

If yes, please provide the name of the branch he/she serves, the name of his/her commanding officer and the military base location: _____

Does the Respondent own any guns? Y / N

If yes, are you asking that the court order the Respondent to surrender those guns? Y / N

To whom should the Respondent surrender them? _____

How many? _____ Describe: _____

Where are they kept? _____

When were they purchased? _____

Does the Respondent have a license to carry a concealed handgun? Y / N

If yes, are you asking that the court suspend this license? Y / N

Do you believe the Respondent has a drug / alcohol problem? Y / N

Why do you believe this? _____

A Protective Order is a Civil Lawsuit

There are three things that we must prove to a family court judge:

1. You were in a family relationship, dating relationship, or previously lived with the respondent;
2. That family violence has occurred; and
3. The violence will likely continue.

Last Incident Information

Date of Last Incident: _____ Address of Last Incident: _____

Has anything like this (violence/family violence etc) happened before with Respondent? If yes, explain also list which law enforcement agency responded, if any:

Which Law Enforcement Agency Responds to your home? _____

Was Law Enforcement called as a result of this incident? Y / N

If not, why? _____

Did you file a complaint with Law Enforcement? Y / N

If not, why? _____

Was the Respondent arrested? Y / N Name of the responding officer: _____

If charges are pending, what charges? _____

Was a Magistrate's Order for Emergency Protection issued? Y / N

Did you sustain any injuries? Y / N Please Describe: _____

Did you receive medical treatment? Y / N From whom? _____

Did anyone take photographs of your injuries? Y / N Who and When? _____

Have you ever received medical treatment as a result of the Respondent's violence? Y / N

If yes, where and when? _____

Was there a weapon involved in this incident? Y / N

What type of weapon was used? _____

Was the Respondent under the influence of drugs or alcohol? Y / N

What type of drugs or alcohol? _____

Have charges ever been filed against the Respondent as a result of family violence to you or anyone else? Y / N

If yes, when and what happened to that case? _____

Options for Final Protective Order Terms

How long would you like the final Protective Order to be in effect for? 1 year [] or 2 years []

Do you want the court to order that the Respondent have NO contact with you at all? Y / N

Has the Respondent Ever Done Any of the Following? Check All That Apply:

- | | |
|---|--|
| <input type="checkbox"/> Pushed, pulled or shoved you | <input type="checkbox"/> Choked you |
| <input type="checkbox"/> Pulled your hair | <input type="checkbox"/> Confined you against your will |
| <input type="checkbox"/> Scratched you | <input type="checkbox"/> Thrown objects at you |
| <input type="checkbox"/> Twisted your arm | <input type="checkbox"/> Prevented you from seeking
medical treatment |
| <input type="checkbox"/> Hit you with his/her hand | <input type="checkbox"/> Prevented you from taking medication |
| <input type="checkbox"/> Hit you with any object | <input type="checkbox"/> Hurt/killed a family pet |
| <input type="checkbox"/> Slapped you | <input type="checkbox"/> Threatened to hurt you |
| <input type="checkbox"/> Kicked or stomped on you | <input type="checkbox"/> Threatened to kill you |
| <input type="checkbox"/> Bit you | <input type="checkbox"/> Threatened to hurt your children |
| <input type="checkbox"/> Pinched you | <input type="checkbox"/> Threatened to kill your children |
| <input type="checkbox"/> Cut you | <input type="checkbox"/> Threatened to take your children
from you |
| <input type="checkbox"/> Shot at you | <input type="checkbox"/> Violent with you in front of
your children |
| <input type="checkbox"/> Hit or hurt you while you were pregnant | <input type="checkbox"/> Threatened to hurt/kill a family pet |
| <input type="checkbox"/> Threatened you with a gun | <input type="checkbox"/> Forced you to have sex |
| <input type="checkbox"/> Threatened you with a knife | <input type="checkbox"/> Tried to force you to have sex |
| <input type="checkbox"/> Burned you | <input type="checkbox"/> Controlled your daily activities |
| <input type="checkbox"/> Stalked (followed) you | |
| <input type="checkbox"/> Spied on you | |
| <input type="checkbox"/> Was jealous/controlling | |
| <input type="checkbox"/> Threatened to cut off financial support from you | |

Describe any other way the Respondent made you afraid: _____

Information About Your Relationship

What type of relationship do you have with the Respondent? Please check the appropriate category(ies):

- | | |
|--|--|
| <input type="checkbox"/> Previously dated | <input type="checkbox"/> Currently married |
| <input type="checkbox"/> Currently living together | <input type="checkbox"/> Previously married (divorced) |
| <input type="checkbox"/> Previously lived together | <input type="checkbox"/> Biological parents of the same child(ren) |
| <input type="checkbox"/> Related by blood, describe: _____ | |
| <input type="checkbox"/> Other, describe: _____ | |

How long have you known the respondent? _____

How long did you and the Respondent date? _____

If you lived with the Respondent, what period of time did you live together?

From: _____ (Date) To: _____ (Date)

If you are (were) married to the Respondent, how long have you been (were) married? _____

When did you last separate/break-up with the Respondent? _____

If you are divorced from the Respondent, when was the divorce final? _____

Is a divorce OR custody case currently pending? Y / N

NOTE: IF YOU HAVE A DIVORCE OR CUSTODY CASE PENDING, THE DISTRICT ATTORNEY'S OFFICE WILL NOT FILE A PROTECTIVE ORDER ON YOUR BEHALF. YOU CAN SPEAK WITH YOUR DIVORCE ATTORNEY ABOUT FILING THE ORDER.

Do you and the Respondent have any child custody orders in place? Y / N

IMPORTANT: If there are child visitation orders in place, we need to designate a neutral (safe) location for pick-up and drop-off of the children. Where would you like that place to be? It should be some place where you feel safe, like a police station that is open 24 hours.

Please list a safe exchange location: _____

Is there property the Respondent has that you want? Y / N

Describe: _____

Is there property you have that the Respondent wants? Y / N

Describe: _____

Are you currently living with the Respondent? Y / N

Are you requesting an order excluding the Respondent from the home until the day of the hearing? Y / N

Have you resided at that address in the last 30 days? Y / N

Has the Respondent committed family violence within the last 30 days? Y / N

Do you own or lease the home? Y / N

Whose name is on the lease/deed? Yours [], Respondent [], Both [], Other [] _____

Information About Your Children and People Who Live With You Now

Please list your children (whether or not they live with you), and list ANYONE who lives with you.

Name: _____ D.O.B.: ___ / ___ / ___

Relation to you: _____

School/Daycare: _____

Address: _____

Is this address confidential? Y / N Include this person on the Protective Order? Y / N

Has this person been assaulted/threatened OR witnessed violence? Y / N

Describe: _____

Name: _____ D.O.B.: ___ / ___ / ___

Relation to you: _____

School/Daycare: _____

Address: _____

Is this address confidential? Y / N Include this person on the Protective Order? Y / N

Has this person been assaulted/threatened OR witnessed violence? Y / N

Describe: _____

Name: _____ D.O.B.: ___ / ___ / ___

Relation to you: _____

School/Daycare: _____

Address: _____

Is this address confidential? Y / N Include this person on the Protective Order? Y / N

Has this person been assaulted/threatened OR witnessed violence? Y / N

Describe: _____

Name: _____ D.O.B.: ___/___/___

Relation to you: _____

School/Daycare: _____

Address: _____

Is this address confidential? Y / N Include this person on the Protective Order? Y / N

Has this person been assaulted/threatened OR witnessed violence? Y / N

Describe: _____

Name: _____ D.O.B.: ___/___/___

Relation to you: _____

School/Daycare: _____

Address: _____

Is this address confidential? Y / N Include this person on the Protective Order? Y / N

Has this person been assaulted/threatened OR witnessed violence? Y / N

Describe: _____

Name: _____ D.O.B.: ___/___/___

Relation to you: _____

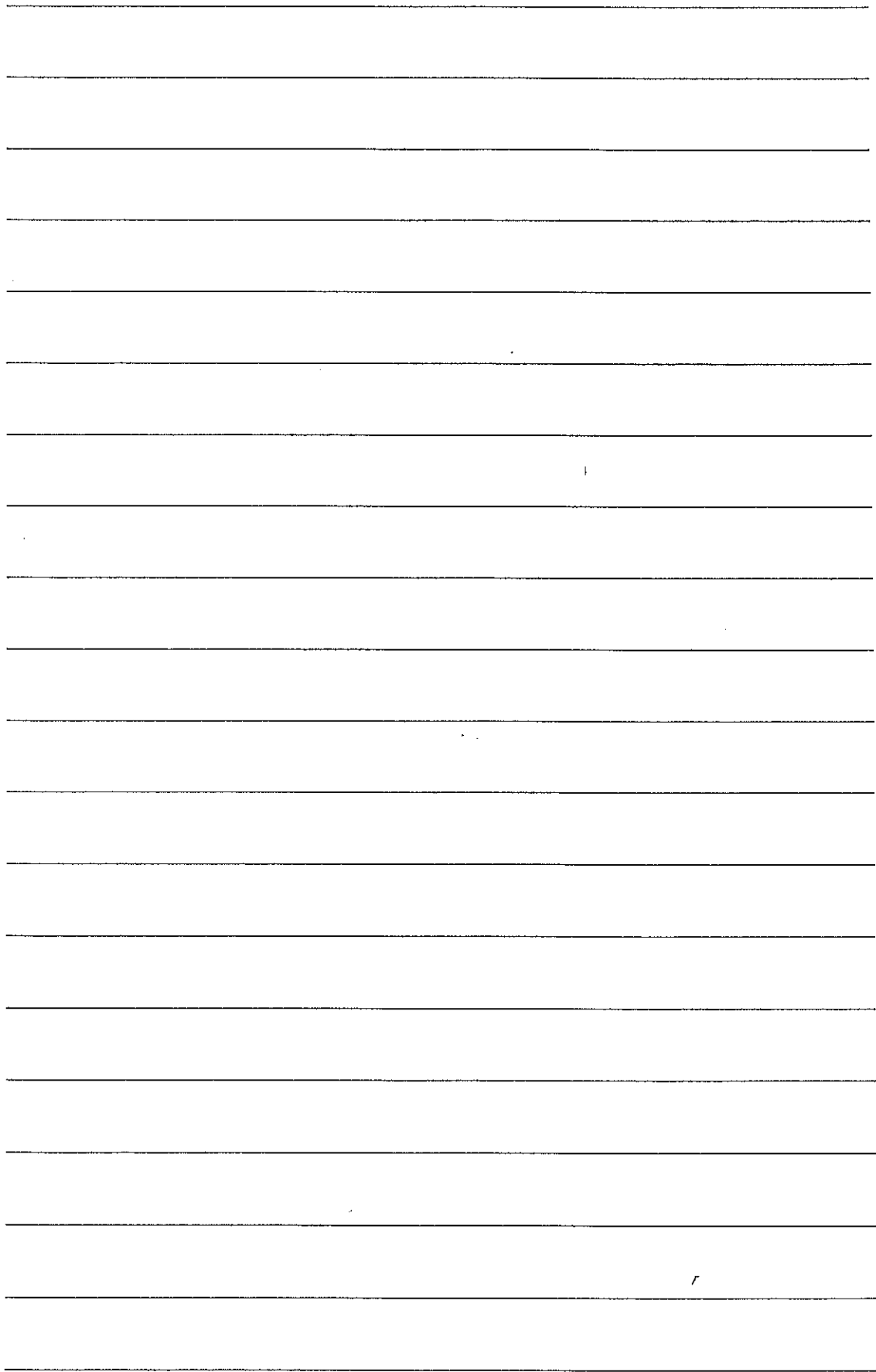
School/Daycare: _____

Address: _____

Is this address confidential? Y / N Include this person on the Protective Order? Y / N

Has this person been assaulted/threatened OR witnessed violence? Y / N

Describe: _____



I believe the violence will continue unless a Protective Order is granted.

The statements I make in this Application are sworn to and the Texas Penal Code, §37.03, makes it a third-degree felony offense to knowingly or intentionally make false statements about material facts in an official proceeding. I understand the consequences of falsifying any information or for bringing this suit for any reason other than for my or my family's protection.

I, the undersigned, state under oath that I am the Affiant, that I have personal knowledge of the facts and circumstances stated herein and they are TRUE and CORRECT to the best of my knowledge and belief.

AFFIANT

Verification

Sworn to and subscribed before me the undersigned authority on this ___ day of _____, 20__.

Notary Public, State of Texas