

STATE OF WYOMING)
) ss
COUNTY OF _____)

IN THE CIRCUIT COURT
_____ JUDICIAL DISTRICT

Petitioner: _____ ,)
Name of person filing for protection order)
)
vs.)
)
Respondent: _____)
Name of person you want to be protected from)

Case Number _____

PETITION FOR SEXUAL ASSAULT ORDER OF PROTECTION

1. **PETITIONER'S LAST NAME, FIRST NAME, MIDDLE INITIAL**

(Print)

NEXT FRIEND'S LAST NAME, FIRST NAME, MIDDLE INITIAL

(If you are filing on behalf of a child age 17 or younger, or on behalf of a disabled or vulnerable adult, write that person's name in the Petitioner box and your name in the Next Friend box. If you are filing for yourself, leave the Next Friend box blank.)

Address (Optional)

City & State (Optional)

Telephone Number (Optional)

Check here if the Petitioner is asking the Court to order the address or phone number of the Petitioner be kept confidential.

OTHER NAMES USED BY PETITIONER _____

DATE OF BIRTH RACE GENDER

HEIGHT _____ WEIGHT _____ EYE COLOR _____ HAIR COLOR _____

2. **RESPONDENT'S LAST NAME, FIRST NAME, MIDDLE INITIAL**

(Print)

Address

Mailing Address (if different)

City & State

Telephone Number

DATE OF BIRTH _____ RACE _____ GENDER _____

HEIGHT _____ WEIGHT _____ EYE COLOR _____ HAIR COLOR _____

Does the Respondent usually wear GLASSES? _____

Does the Respondent usually have FACIAL HAIR? _____

EMPLOYER _____

PLACE OF EMPLOYMENT Address _____

DRIVER'S LICENSE State of Issue _____

VEHICLE Make _____ Model _____ Year _____

VEHICLE LICENSE PLATE Number _____

VEHICLE LICENSE PLATE State of Issue _____

STATE and COUNTRY OF BIRTH _____

OTHER NAMES USED BY THE RESPONDENT _____

If you can, describe the Respondent's distinguishing marks, scars, tattoos, and tell where they are located:

If you can, list firearms and ammunition possessed by the Respondent. If you know where the firearms or ammunition are kept, give that information too.

If the Respondent is under the age of 18, and you know the names or contact information of the Respondent's parents or guardians, please list that here.

3. Select the most accurate description of your relationship with the Respondent:

We are married to each other.

We are married to each other, but we do not live together.

In which county? _____
 What is the case number? _____
 Is the Respondent in jail/prison now? _____

6. Have you received help from a victims' advocate? Yes No
7. The Court may issue an Ex Parte Order of Protection. (That's a temporary Order that can be granted before the Court hears from the Respondent.) The Court will schedule a hearing. That's when the judge will decide whether to issue an Order of Protection, which will be in effect for longer. You can learn more about the hearing and the two types of Orders in the Instructions for this form.

You can ask the Court for certain kinds of relief to be included in the Ex Parte Order of Protection and the Order of Protection. This list is how you tell the Court what you think will help. Check all that apply:

A **Address Immediate Danger** – Issue an Ex Parte Order of Protection because I believe an immediate danger exists that I will be sexually assaulted again or that other serious physical harm will be done to me.

B **Protection for Others** – Include the following people in the Order of Protection:

Name	Relationship to Me	Reason this Person Needs Protection

C **No Contact** – Order the Respondent not to contact, phone, mail, e-mail, or communicate with me in any way, either directly or indirectly, including electronically.

D **Stay Away** – Order the Respondent to:

a. Stay at least _____ (distance) from me.

b. Stay away from my

Home:

I will submit the home address confidentially.

OR

I will list the home address here:

 (address)

Work:

(address)

The Respondent does does not work at the same place as me.

School or Childcare:

(address)

The Respondent does does not go to the same school as me.

Place of worship:

(address)

The Respondent does does not attend the same place of worship as me.

If the Respondent works at the same place, goes to the same school, or attends the same place of worship as you, the Court cannot order the Respondent to stay away from that place. Give information the Court should consider about interactions with the Respondent in those settings.

E **Other Assistance Needed** – Explain any other instructions that could help protect you and the other individuals listed on this form.

8. After this Petition is filed, the Court will schedule a hearing. You are **REQUIRED** to

take part in the hearing. Please check one of the boxes below.

A **Appear in Person** I will attend the hearing in person at the courthouse.

B **Appear Virtually** I ask the Court to allow me to attend the hearing by phone or computer instead of going to the courthouse in person.

I, the Petitioner, being first duly sworn upon my oath, state that I have read the above and foregoing information, and I believe the matters set forth are true and correct under penalty of perjury:

Date _____

PETITIONER

STATE OF WYOMING)
) ss
COUNTY OF _____)

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20_____.

Witness my hand and official seal.

CLERK OF COURT/NOTARIAL OFFICER

My commission expires: _____

A Wyoming Judicial Branch Court Navigator helped with this form.