

GENERAL INSTRUCTIONS
FOR THOSE SEEKING A PROTECTION FROM ABUSE ORDER

NOTICE

The protection from abuse process is designed to provide quick and immediate protection. However, the process may require time, expertise, or more than one hearing. If you have questions, you should seek help from an attorney or victim services advocate. The Kansas Crisis Hotline (1-888-363-2287) or Kansas Legal Services (1-800-723-6953) may be able to help you find an attorney or advocate.

These are basic forms and they do not cover every situation. The Clerk of the District Court cannot help you with these forms. The clerk cannot give legal advice to you or tell you about your rights or responsibilities. The clerk can only provide very limited information about the protection order process. You can find more information about protection from abuse at <http://www.kcsdv.org/resources/brochures/criminal-justice/pfa.html>.

1. You may seek a protection from abuse order:
 - a. For yourself; or,
 - b. For yourself and your minor child(ren); or,
 - c. For only your child(ren) or other minor child(ren) who reside with you.

2. Each person for whom protection is sought must be in (or have been in) an “intimate partner or household member” relationship with the defendant.

“Intimate partner or household member” relationship means:

 - a. Persons who are in a dating relationship (a social relationship of a romantic nature); or,
 - b. Persons who have been in a dating relationship; or,
 - c. Persons who live together; or,
 - d. Persons who have lived together; or,
 - e. Persons who have had a child in common.

3. Each person needing protection must have been abused. This means that one of the following must have occurred:
 - a. The defendant physically hurt you or a minor child on purpose; or,
 - b. The defendant tried to physically hurt you or a minor child; or,
 - c. The defendant threatened to physically hurt you or a minor child; or,
 - d. The defendant engaged in any sexual contact or attempted sexual contact with you or a minor child when such person was incapable of giving consent; or,
 - e. The defendant engaged in sexual conduct (touching or sexual intercourse) with a minor child under 16 years of age.

4. If you meet the requirements above, you may file a Petition for Protection from Abuse Order with any district court. If you want your address and telephone number to remain confidential, you must complete the Protection from Abuse Confidential Address Form and include it with your petition.

5. You must notify the defendant by personal service that you have filed a Petition for a Protection from Abuse Order. To obtain personal service, you must fill out a Request for Service form, requesting that the sheriff deliver the Petition for Protection from Abuse to the defendant.
6. If the defendant is a minor, you must complete the Minor Defendant Addendum. Petitions, motions and temporary protection from abuse orders filed against a minor defendant must be served by serving the minor **and**:
 - a. The minor's guardian or conservator, if any; **or**,
 - b. The minor's father or mother; **or**,
 - c. A person having the minor's care or control; **or**,
 - d. A person with whom the minor resides.

If service cannot be made upon any of these people, then service may be obtained as provided by order of the judge.

7. You should be available to testify at future hearings as set by the judge. If you fail to appear, the case may be dismissed. You are the one requesting the protective order, and you must convince your judge of what you claimed to be true. You may bring other evidence and call additional witnesses in support of your claim.
8. A Final Protection from Abuse Order will expire after one year or on the date stated in the order unless you request an extension or modification from the court before the order expires. You may request that the court extend an order for one additional year, or longer under certain circumstances. If the defendant has violated a valid protection order or been convicted of a person felony against you or a member of your household, you may request the court extend the order for at least two years or up to the lifetime of the defendant. A request to extend an order for more than one year must be personally served on the defendant and the court must hold a hearing where the defendant may appear, present evidence, and question witnesses.
9. If you are the defendant and you want to seek a protection from abuse order against the plaintiff, you must meet all the requirements in paragraphs one (1) through three (3) above, and then you may file a written counter-petition.
10. If you decide to seek child support, it is highly recommended that you seek the advice of an attorney. In order to obtain child support, you must complete a Domestic Relations Affidavit and a Child Support Worksheet and attach them to the Petition for Protection from Abuse. If the court grants child support, the court will complete the Child Support Addendum and attach it to the Final Protection from Abuse Order. You will then need to complete a Kansas Payment Center Form, attach it to a copy of the Final Protection from Abuse Order including the Child Support Addendum and provide it to the Clerk of the District Court.

IN THE DISTRICT COURT OF SEDGWICK COUNTY, KANSAS

_____, Plaintiff

vs.

Case No. _____

_____, Defendant

PROTECTION FROM ABUSE CONFIDENTIAL ADDRESS FORM
(K.S.A. 60-3104(e))

NOTE: IF THE COURT FINDS THAT THE PLAINTIFF'S ADDRESS AND TELEPHONE NUMBER NEED TO REMAIN CONFIDENTIAL FOR THE PROTECTION OF THE PLAINTIFF OR THE MINOR CHILD(REN), THIS FORM WILL BE SHOWN ONLY TO AUTHORIZED COURT OR LAW ENFORCEMENT PERSONNEL AND WILL NOT BE DISCLOSED TO THE PUBLIC OR TO THE DEFENDANT. IT IS THE PLAINTIFF'S RESPONSIBILITY TO NOTIFY THE COURT OF ANY CHANGE IN ADDRESS OR TELEPHONE NUMBER.

Name of Plaintiff: _____

Confidential Address:

Street _____

City _____ State _____ Zip Code _____

Phone Number _____



DC18

SERVICE COVER SHEET AND NCIC INFORMATION FORM

THIS FORM IS NOT TO BE INCLUDED IN THE PUBLIC RECORD AND SHOULD BE DESTROYED ONCE THE REQUIRED INFORMATION IS ENTERED IN THE NCIC FILE.

This information is intended to be used by law enforcement to identify the defendant for enforcement of the order and for entry into the National Crime Information Center (NCIC) database. Please fill out the information as completely and correctly as possible, be particularly careful with the dates of birth and spelling of names. PLEASE PRINT.

If there is more than one person being protected by the order (i.e. children), use the second page to provide information about each protected person.

<p>Restrained Person/Defendant's Name: <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> Any other name(s) Defendant has been known by: _____ _____ Defendant can be found at (give all available addresses): Home Address: _____ _____ Phone number(s): _____ Times Defendant is usually there _____ _____ Place of employment: _____ _____ Phone number(s): _____ Times Defendant is usually there _____ _____ Other Address: _____ _____ Phone number(s): _____ Times Defendant is usually there _____ _____</p>	<p>Restrained Person/Defendant Identifiers: (Please include all available information.)</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 15%;">SEX</td> <td style="width: 15%;">RACE</td> <td style="width: 15%;">DOB</td> <td style="width: 15%;">HT</td> <td style="width: 15%;">WT</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td>HAIR</td> <td>EYES</td> <td colspan="3">SOCIAL SECURITY NUMBER</td> </tr> <tr> <td> </td> <td> </td> <td colspan="3"> </td> </tr> <tr> <td colspan="2">DRIVERS LICENSE #</td> <td>DL STATE</td> <td colspan="2">DL EXP. DATE</td> </tr> <tr> <td colspan="2"> </td> <td> </td> <td colspan="2"> </td> </tr> <tr> <td colspan="2">VEHICLE MAKE</td> <td>VEHICLE MODEL</td> <td colspan="2">VEHICLE YEAR</td> </tr> <tr> <td colspan="2"> </td> <td> </td> <td colspan="2"> </td> </tr> </table> <p>Distinguishing Features (tattoos, scars, locations frequented, etc.): Please describe: _____ _____ _____ _____ _____ _____ Does Defendant wear glasses? <input type="checkbox"/> Yes <input type="checkbox"/> No Does Defendant own or possess any weapons? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, what kind(s)? _____ _____ _____ _____</p>	SEX	RACE	DOB	HT	WT						HAIR	EYES	SOCIAL SECURITY NUMBER								DRIVERS LICENSE #		DL STATE	DL EXP. DATE							VEHICLE MAKE		VEHICLE MODEL	VEHICLE YEAR						
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<p>Protected Person's Name: <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> Relationship to Defendant: <input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common</p>	<p>Protected Person's Identifiers:</p> <p>Full Date of Birth (mm/dd/yyyy) <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px; vertical-align: middle;"></div> <i>(It is important to include the protected person's full date of birth)</i></p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Race _____</p>																																								

SERVICE COVER SHEET AND NCIC INFORMATION FORM

Other Protected Persons Information

<p>Protected Person's Name:</p> <p>[REDACTED]</p> <p>Relationship to Defendant:</p> <p><input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common</p>	<p>Protected Person's Identifiers:</p> <p>Full Date of Birth (mm/dd/yyyy) [REDACTED] <i>(It is important to include the protected person's full date of birth)</i></p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Race _____</p>
<p>Protected Person's Name:</p> <p>[REDACTED]</p> <p>Relationship to Defendant:</p> <p><input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common</p>	<p>Protected Person's Identifiers:</p> <p>Full Date of Birth (mm/dd/yyyy) [REDACTED] <i>(It is important to include the protected person's full date of birth)</i></p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Race _____</p>
<p>Protected Person's Name:</p> <p>[REDACTED]</p> <p>Relationship to Defendant:</p> <p><input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common</p>	<p>Protected Person's Identifiers:</p> <p>Full Date of Birth (mm/dd/yyyy) [REDACTED] <i>(It is important to include the protected person's full date of birth)</i></p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Race _____</p>
<p>Protected Person's Name:</p> <p>[REDACTED]</p> <p>Relationship to Defendant:</p> <p><input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common</p>	<p>Protected Person's Identifiers:</p> <p>Full Date of Birth (mm/dd/yyyy) [REDACTED] <i>(It is important to include the protected person's full date of birth)</i></p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Race _____</p>
<p>Protected Person's Name:</p> <p>[REDACTED]</p> <p>Relationship to Defendant:</p> <p><input type="checkbox"/> are or <input type="checkbox"/> have been in a dating relationship <input type="checkbox"/> reside together or <input type="checkbox"/> formerly resided together <input type="checkbox"/> have a child in common</p>	<p>Protected Person's Identifiers:</p> <p>Full Date of Birth (mm/dd/yyyy) [REDACTED] <i>(It is important to include the protected person's full date of birth)</i></p> <p>Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Race _____</p>

IN THE DISTRICT COURT OF SEDGWICK COUNTY, KANSAS

Plaintiff

Case No. _____

vs.

Defendant

Petition Pursuant to K.S.A. Chapter 60

PETITION FOR PROTECTION FROM ABUSE ORDER

(K.S.A. 60-3101 *et seq.*)

1. Plaintiff seeks an order for protection from abuse:

a. For Plaintiff Only, or
(Kansas law requires a former or current relationship which may be established by any one of the following options.)

i. Plaintiff and Defendant:

- are in a dating relationship
- were formerly in a dating relationship
- reside together in the same residence
- formerly resided together in the same residence
- have a child in common

b. For Plaintiff and Plaintiff's minor child(ren), or
(Kansas law requires a former or current relationship which may be established by any one of the following options.)

i. Plaintiff and Defendant:

- are in a dating relationship
- were formerly in a dating relationship
- reside together in the same residence
- formerly resided together in the same residence
- have a child in common

ii. Plaintiff's minor child(ren) and Defendant:

- reside together in the same residence
- formerly resided together in the same residence



c. Only on behalf of Plaintiff's minor child(ren) or minor child(ren) residing with Plaintiff (Kansas law requires a former or current relationship which may be established by any one of the following options.)

i. Minor child(ren) and Defendant:

- are in a dating relationship
- were formerly in a dating relationship
- reside together in the same residence
- formerly resided together in the same residence
- have a child in common

The minor child(ren) for whom Plaintiff seeks protection are: (give full names and year of birth)

NAME	YOB	MOTHER'S NAME	FATHER'S NAME
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Defendant can be served at: (please provide all available addresses)

HOME: street _____ city _____
state _____ zip code _____ phone number _____
times when defendant is usually there _____

WORK: street _____ city _____
state _____ zip code _____ phone number _____
times when defendant is usually there _____

OTHER: street _____ city _____
state _____ zip code _____ phone number _____
times when defendant is usually there _____

3. If the defendant is known to be a minor, a Minor Defendant Addendum is attached.

4. Plaintiff seeks protection from abuse because Defendant: (check all that apply)

- caused Plaintiff bodily injury or attempted to cause Plaintiff bodily injury
- placed Plaintiff in fear of imminent bodily injury by threatening Plaintiff
- caused the minor child(ren) bodily injury or attempted to cause the minor child(ren) bodily injury
- placed the minor child(ren) in fear of imminent bodily injury

- engaged in any sexual contact or attempted sexual contact with the Plaintiff without consent or when the Plaintiff was incapable of giving consent.
- engaged in any sexual contact or attempted sexual contact with the minor child(ren) without consent or when the minor child(ren) was incapable of giving consent.
- engaged in any of the following acts with a minor under 16 years of age who is not the spouse of Defendant: sexual intercourse or lewd fondling or touching on the person of either the minor or Defendant.

5. Describe why Plaintiff seeks a protection from abuse order and include specific facts: _____

(Attach additional pages as needed.)

6. Plaintiff requests that Plaintiff's address and/or telephone number remain confidential for the following reason(s): (complete if appropriate)

(If Plaintiff requests that Plaintiff's address remain confidential, Plaintiff must complete the Protection from Abuse Confidential Address Form and include it with this petition.)

7. Plaintiff requests that the court issue an ex parte Temporary Order of Protection and Final Order of Protection restraining defendant from:

- abusing, molesting or interfering with the privacy or rights of the protected person(s)
- entering or coming on or around the premises or the residence of the protected person(s) located at: _____, and the workplace located at: _____.

(Give address or other description of residence and workplace from which Defendant is to be excluded. DO NOT include the residential address if Plaintiff is requesting that Plaintiff's residential address is to remain confidential.)

8. Plaintiff states the residence is:

- jointly owned or rented and jointly occupied by Plaintiff and Defendant
- owned or rented by Plaintiff
- owned or rented by Defendant only