
Red Lake Nation Tribal Court
Red Lake Nation Jurisdiction

In re. the matter of:

_____,

Petitioner

V.

_____,

Respondent

**Petitioner's Affidavit
and Petition for
Order for Protection**

Case No. _____

READ THE INSTRUCTION BEFORE FILLING OUT THESE FORMS

I, being sworn; affirmed on oath, state that:

1. I am the Petitioner in this action. This affidavit supports my request for an Order for Protection (OFP)

General Information

2. My address is _____
(You may provide your address separately if you want it to remain confidential)

My Date of Birth is _____.

3. Respondent Address is _____
Date of Birth _____.

(If Respondent is under 18 years old, service must be made on Parent or Guardian of Respondent as well as Respondent)

4. My Relationship with the Respondent(s) is as follows: (Check all that apply)

- Husband / Wife
- Former Husband / Wife
- Living Together
- Lived Together (From ___/___/_____ to ___/___/_____)
- Have a child together
- Have an unborn child together
- Parent / Child
- Related by Blood
- Significant Romantic or Sexual Relationship (if checked, answer items below)

How long did the relationship last? _____

How often did you have contact with the Respondent? _____

Length of time since relationship ended: _____

5. I am (or have been) involved with the Respondent in the following Court actions:

Type of Action	Court	Date
<input type="checkbox"/> Marriage Dissolution/Divorce	_____	_____
<input type="checkbox"/> Custody	_____	_____
<input type="checkbox"/> Paternity	_____	_____
<input type="checkbox"/> Domestic Abuse related charges	_____	_____
<input type="checkbox"/> Domestic Abuse related convictions	_____	_____
<input type="checkbox"/> Child Protection	_____	_____

Abuse Information

For an explanation of what constitutes domestic abuse, see page one (1) of the instructions.

6. I HAVE / HAVE NOT been involved with the Respondent in a prior application for an Order for Protection (If you have been involved in a prior application for an Order for Protection, fill in the following):

- A. Court where application was filed: _____
- B. Date filed: _____
- C. Name of Judge or Judicial Officer: _____
- D. Result:
 - Temporary Ex Parte' Order only (Petitioner withdrew application or failed to appear)
 - OFP Granted: Expiration date: _____
 - OFP Denied:

7. Respondent inflicted or threatened Domestic Abuse upon me and / or upon the minor child(ren) named here:

8. Describe specific acts of Domestic Abuse and give approximate dates, listing the most recent incidents first. Attach additional sheets if necessary. (See paragraph eight (8) of the instruction sheet).

9. As a result of the Domestic Abuse, I have (Attach any Medical or Police records to this affidavit or bring them with you to Court.)

- had contact with Law Enforcement _____
- sought medical help _____
(indicate dates and location if possible)

10. Respondent and I are the parents of the following minor child(ren) (see paragraph ten (10) of the instruction sheet)

Names	Gender	Date(s) Birth	Person who child(ren) are with now	Court Action involving Child(ren) (Indicate court/Type)
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____

11: Other minor child(ren) who are involved:

Names	Gender	Date(s) Birth	Person who child(ren) are with now	Court Action involving Child(ren) (Indicate court/Type)
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____
_____	_____	_____	_____	_____/_____

12. A. Custody of the minor child(ren) listed below should be awarded to me.

B. Respondent should have the following parenting time (visitation) with the minor child(ren).

- C. Respondent's parenting time (visitation) with the minor child(ren) should be:
 Restricted or Supervised.

D. I am seeking the above relief regarding custody and visitation because:

Requests for Court Action

13. An emergency exists and I fear immediate and present danger of further acts of Domestic Violence.
14. Based on this Affidavit, I am asking the Court to give me the following immediate protection:
- Restrain and enjoin Respondent from causing me or the minor child(ren) any physical harm and from causing me or the minor child(ren) fear of immediate harm.
 - Direct Respondent to have no contact with me or the minor child(ren), whether in person, with or through other persons, by telephone, letter or in any other way.
 - Exclude Respondent from:
 - the dwelling we share
 - the place where I live: Petitioner's address is confidential
 - Address: _____
 - the place where I work: Location _____
Address _____
 - Other

15. Based on this Affidavit and any additional information before the Court after a full hearing, I request the following, in addition to those items requested above:
- Exclude Respondent from a reasonable area surrounding my residence.
 - Grant me sole Legal and Physical Custody of the Child(ren), subject to the following parenting time (visitation) to the Respondent (see question 12):
 - No parenting time (visitation)
 - Supervised parenting time (visitation)
 - Parenting time (visitation) subject to the following conditions:

- Direct that the following counseling, treatment, or other social services be provided to the Respondent:
 - Domestic Abuse Program
 - Alcohol / Chemical Dependency evaluation and treatment
 - Other

- Direct Law Enforcement Agency to provide the following assistance:

- Provide other relief as necessary for the protection of me and the minor child(ren).

Date: _____

Petitioner

Name: _____
(If your address is confidential, provide the following ONLY on the Petitioner's Information Sheet)

Address: _____

City/State/ZIP: _____

Telephone Number: _____

Subscribed and sworn before me

This _____ day of _____, 20____

Clerk of Court / Notary Public

Petitioner's Information Sheet

The following information will assist the Court in completing the processing of your case. Please complete and bring this document to the Court Administration Office at the time you bring your Petition and other Documents.

Check off all sections that apply to you:

I want my address to remain secret and not be part of the public file.
My address is: _____

The Respondent lives in the same household as I do.

The Respondent and I work for the same employer YES NO

If yes, answer the following:

1. Do you have the same Supervisor as the Respondent?

Yes, your Supervisor's Name: _____

No

2. Do you work in the same Building or Department as the Respondent?

Yes, Name of Building: _____

Yes, Name of Department: _____

No

3. The Respondent and I work the same hours: _____

The Respondent and I attend the same School: _____

I want my telephone number to remain secret and not be part of the public file.

My Telephone Number is: _____

When the order has been signed:

Please call me at the above number and I will return to pick up my copy of the Order.

I will pick up my copy of the Order at the Women's Shelter or advocacy program.

I will pick up my copy of the order at the Law Enforcement Center.

Please FAX my copy to me at: _____

Please mail my copy to ma at: _____

I will wait at the Courthouse until the Order is ready. I understand that it may be several hours before a decision is made and either I receive my copy of the OFP or my Petition is denied

If more information is needed or the Order is not approved, please call me at the shown above.

Date

Signature of Petitioner

Law Enforcement Information Sheet
Instructions to Petitioner –
Important! Please read carefully!

Law Enforcement will personally serve your domestic abuse papers on the Respondent. Since the hearing usually cannot be held without locating and giving these papers to the Respondent, it is important that Law Enforcement have accurate and detailed information to help locate the Respondent and avoid delay.

You are NOT required to give all the information requested on this information sheet. If you do not give this information it may be more difficult to locate the Respondent and it could make service more dangerous for Law Enforcement and others.

You may call Law Enforcement or the Court to find out if an Officer found and gave the domestic abuse papers to the Respondent.

Petitioner is asked not to let the Respondent know that domestic abuse papers are going to be served on Him / Her. This advance notice could make service of the papers more difficult and dangerous.

Instructions to the Court.

This information should not be kept in your office – forward to Law Enforcement

Respondent Information:

Full Name: _____

Home Address: _____

City: _____ State: _____ ZIP _____

Phone: _____ Nickname/Alias: _____

Directions: _____

Respondent's Physical Description:

Date of Birth: _____ Race: _____ Height: _____ Weight: _____

Hair Color: _____ Eye Color: _____ Glasses: No Yes

Beard: No Yes Moustache: No Yes Picture Attached: No Yes

Tattoos: _____

Scars: _____

Other Identifying characteristics: _____

Does Respondent have any weapons? No Yes: _____

Does Respondent have a Driver's License? No Yes

Vehicle:

Make and Model: _____ Color: _____ Year: _____

License Number: _____ State Name on License Plate: _____