Petition for a Court Order of Protection - Child

Mocco

County, Missouri Circuit Court (County where court is located. City of Saint Louis is considered a county.)

Use this form to ask for a court Order of Protection on behalf of a child (person under 17 years of age unless otherwise emancipated) who has been a victim of domestic violence, stalking, or sexual assault. The Petitioner must be a parent, guardian, guardian ad litem, a court appointed special advocate, or a juvenile officer. Learn more: https://www.courts.mo.gov/page.jsp?id=383. If you have more than five children, complete the Petition for a Court Order of Protection-Child – Addendum. **Do not include the name of each child on this form. Include the name(s) on the Confidential Redacted Information Filing Sheet**.

Redacted Information Filing Shee	t.
	Case Number
	(Will be assigned by the court when case is filed)
(Your Name) Petitioner,	
You are the Petitioner . The Petition	er is the person who starts a court case.
I am the	
parent or guardian of the child(re	n).
guardian ad litem for the child(ren	າ).
court appointed special advocate	for the child(ren).
☐ juvenile officer.	
Children needing protection:	
Protected Child One Initials Only:	
Age: Sex: [] F [] M	
Protected Child Two Initials Only:	
Age: Sex: _ F _ M	
Protected Child Three Initials Only	y:
Age: Sex: [] F [] M	
Protected Child Four Initials Only	:
Age: Sex: [] F [] M	
Protected Child Five Initials Only:	
Age: Sex: _ F _ M	
☐ I have more than five children ne children.	eding protection. See Addendum for information on additional
And	
Respondent. The Respondent is the person the o	child(ren) need(s) protection from.

SJRC (01-25) CP40

This petition is being filed in the county where (check all that apply): the child(ren) live.
the domestic violence, stalking, or sexual assault happened.
Respondent may be served with this petition.
Trespondent may be served with this petition.
A. Information about the people involved in this case
Information about the protected child(ren).
The person the child(ren) need(s) protection from will get a copy of this form.
Child One's Relation to Respondent Respondent (check all that apply):
is the child's parent.
is the child's step-parent or former step-parent.
☐ lives with the child.
☐ used to live with the child. ☐ has stalked the child.
has starked the child.
other:
The femily hame of the shild is: (sheek the beyon that apply)
The family home of the child is: (check the boxes that apply) owned rented other
by: Respondent Petitioner Other (name)
by. Trespondent Tetitioner Tetiti
Child Two's Relation to Respondent
Respondent (check all that apply):
is the child's parent.
is the child's step-parent or former step-parent.
☐ lives with the child.
used to live with the child.
has stalked the child.
 has sexually assaulted the child. other:
The family home of the child is: (check the boxes that apply)
owned rented other
by: Respondent Petitioner Other (name)

Child Three's Relation to Respondent Respondent (check all that apply):		
is the child's parent.		
is the child's step-parent or former step-parent. lives with the child.		
☐ used to live with the child.		
has sexually assaulted the child.		
other:		
The family home of the child is: (check the boxes that apply)		
owned rented other		
by: Respondent Petitioner Other (name)		
Child Four's Relation to Respondent		
Respondent (check all that apply):		
is the child's parent.		
is the child's step-parent or former step-parent.		
☐ lives with the child.		
used to live with the child.		
has stalked the child.		
has sexually assaulted the child.		
other:		
The family home of the child is: (check the boxes that apply)		
owned rented other		
by: Respondent Petitioner Other (name)		
Child Five's Relation to Respondent		
Respondent (check all that apply):		
is the child's parent.		
is the child's step-parent or former step-parent.		
☐ lives with the child.		
used to live with the child.		
has stalked the child.		
has sexually assaulted the child.		
other:		
The family hame of the shild is: (check the bayes that apply)		
The family home of the child is: (check the boxes that apply)		
□ owned □ rented □ other		
by: Respondent Petitioner Other (name)		

Information about the person the child(ren) need protection from. The court and law enforcement will use this section to try to find Respondent. Fill in as much information as you can.

Other names Respondent is known by (list all):		
Age: Is _ at least 17 years of age or emancipated _ under 17. (Emancipated means no longer under the control, support, and responsibility of a parent or guardian.)		
Race and Ethnicity: (Select one or more)		
☐ Black or African American ☐ Native Hawaiian or other Pacific Islander ☐ White		
☐ Hispanic or Latino ☐ Middle Eastern or North African (MENA) ☐ Other ☐ Unknown		
Sex: Male Female Height: Weight:		
Hair (Select one): Blond Black Blue Brown Green Grey Orange Pink		
☐ Purple ☐ Red ☐ Sandy ☐ Unknown or Completely Bald ☐ White		
Eyes (Select one): Black Blue Brown Dichromatic Green Grey Hazel		
☐ Multicolored ☐ Maroon ☐ Pink ☐ Unknown		
Identifying marks (Examples: tattoos, birthmarks, braces, scars, mustache, beard, pierced ear,		
glasses):		
Home address:		
City: County:		
Phone number:		
Work name:		
Work address:		
Work phone: Work hours:		
Other places law enforcement may find Respondent to serve the paperwork:		
Other places law emorcement may find respondent to serve the paperwork.		
Does Respondent have social media accounts such as Facebook, Snapchat, TikTok, Instagram,		
etc.? Yes No If yes, list the account(s) and user name(s):		

Does Respondent carry a weapon or firearm? Yes No		
If Yes, list the weapon(s) or firearm(s): Is Respondent on Probation or Parole? Yes No If Yes, name of Probation or Parole Officer:		
Is Respondent currently in jail? Yes No		
What type of vehicle(s) does Respondent drive? (Include vehicle make, model, year, color, license plate number)		
R Evolain what happened		
B. Explain what happened		
Check all boxes that apply. List all dates and locations for each box selected. If the exact date(s) and location(s) is not known, list the approximate date(s) and describe the location(s) the best you can. Select the box for each child who is a victim of the act of domestic violence, stalking, or sexual assault. You will be asked to provide details below.		
Respondent knowingly and intentionally:		
☐ caused or attempted to cause physical harm to the child(ren). ☐ Child One ☐ Child Two ☐ Child Three ☐ Child Four ☐ Child Five Date(s):		
Location(s):		
☐ placed or attempted to place the child(ren) in fear of immediate physical harm. ☐ Child One ☐ Child Two ☐ Child Three ☐ Child Four ☐ Child Five Date(s): Location(s):		
 □ coerced the child(ren). Respondent threatened or forced the child(ren) to do something the child(ren) did not want to do. □ Child One □ Child Two □ Child Three □ Child Four □ Child Five Date(s): 		
Location(s):		

	stalked the child(ren). Two or more times Respondent followed the child(ren), watched the child(ren), threatened the child(ren), communicated with the child(ren), or caused somebody to do those things to the child(ren). It caused the child(ren) to be in fear of physical harm. Child One Child Two Child Three Child Four Child Five		
	Dates:		
	Locations:		
	harassed the child(ren). More than one time, Respondent caused substantial emotional distress to the child(ren) by following the child(ren), looking in the window, lingering outside the residence, or		
	☐ Child One ☐ Child Two ☐ Child Three ☐ Child Four ☐ Child Five		
	Dates:		
	Locations:		
	sexually assaulted the child(ren). Respondent used force, threat of force, or duress to make the child(ren) perform a sexual act against the child(ren)'s will.		
	☐ Child One ☐ Child Two ☐ Child Three ☐ Child Four ☐ Child Five		
	Date(s):		
	Location(s):		
	unlawfully imprisoned the child(ren). Respondent refused to let the child(ren) leave when the child(ren) wanted to leave.		
	☐ Child One ☐ Child Two ☐ Child Three ☐ Child Four ☐ Child Five		
	Location(s):		
□.	followed the child(ren) from place to place.		
	Child One Child Two Child Three Child Four Child Five		
	Date(s): Location(s):		
	Eccation(s).		
	abused the shild(ren)'s not(s)		
Ш,	abused the child(ren)'s pet(s).		
	Child One Child Two Child Three Child Four Child Five		
	Date(s):		
	Location(s):		
	threatened to do any of the above.		
	Child One Child Two Child Three Child Four Child Five		
	Date(s):		
	Location(s):		

☐ See Addendum for information on what happened to additional children needing protection from Respondent.
This is what happened (include specific details):
Do not include the name of any child in the details. Use "the child", "the children", "Child One", "Child Two", etc. or the child's initials.

exists because (describe):
Do not include the name of any child. Use "the child", "the children", "Child One", "Child Two", etc. or the child's initials.
☐ I have photographs, text messages, phone messages, or other evidence of the abuse.
C. I request the court
Issue an emergency temporary order of protection (Ex Parte Order of Protection) restraining Respondent from acts of domestic violence, stalking, and sexual assault against the protected child(ren). I am also requesting the court to issue a Full Order of Protection against Respondent after a hearing on this petition to protect the child(ren) from acts of domestic violence, stalking, and sexual assault for a longer period of time as determined by the court.
Use this section to ask the court for what you want in the case. Check all boxes that apply.
Use this section to ask the court for what you want in the case. Check all boxes that apply. 1. I want the court to order Respondent NOT to:
 1. I want the court to order Respondent NOT to: commit or threaten to commit domestic violence, stalking, sexual assault, molesting, or disturbing the peace of the protected child(ren). abuse or threaten to abuse the protected child(ren)'s pet(s).
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come with	in (feet) of the pro	tected child(ren).		
communic way.	cate with the protected child(ren) by	phone, email, text, social med	lia, or in any o	ther
have any order.	contact with the protected child(ren) except as specifically authorize	zed by the cou	urt
other:				
	esting the Ex Parte Order of Protected child(ren) because:	tion exclude Respondent from	the family hor	ne of
■ It is	s in the best interest of the child(ren) to remain in the home;		
• As	ubstantial risk to the child(ren) exis	ts unless Respondent is exclud	ded; and	
	 A remaining adult family or household member is able to care adequately for the child(ren) in the absence of Respondent. 			
Offic	a(ren) in the absence of responde	ont.		
Award o	custody and visitation of the	protected child(ren).		
\wedge		,		
The court cannot change custody if a prior order regarding custody is pending or has been made.				
Who should receive custody of each child?				
Child	Person to Receive Custody	Relationship to Parties	Temporary	Full
Child One	resource reconversed desired	relationship to Farties		<u>. u</u>
Child Two		-	. ⊔ □	
Child Three		_	. ⊔ □	
Child Four			. ⊔	
			. ⊔ □	
Child Five				
See Addendum requesting custody and visitation for additional children.				
Is there cour	t case for custody for the child(r	en) identified above?		
If yes, select which child(ren) and enter the case number(s):				
☐ Child One ☐ Child Two ☐ Child Three ☐ Child Four ☐ Child Five Case number(s):				

2.

	Award visitation with the child(ren) as follows:
_	
3.	Order Respondent to pay child support, maintenance, other support, court fees, or for injuries I received.
	Child support is money paid by one parent to the other parent or guardian for the financial support of a child. Child support may be ordered by a court or child support enforcement agency.
	Maintenance is money paid by one spouse to the other spouse for financial support.
	☐ I ask Respondent to pay \$ in child support to me every ☐ week ☐ month.
	☐ I ask Respondent to pay \$ in maintenance to me every ☐ week ☐ month.
	☐ I ask Respondent to pay \$ to me for rent or mortgage payments to the residence occupied by the protected child(ren) ☐ per week ☐ per month.
	☐ I ask Respondent to pay \$ to me for reasonable housing or other services provided to the protected child(ren) by a shelter for victims of domestic violence ☐ per week ☐ per month.
	I ask Respondent to pay \$ to me for medical treatment or services provided to the protected child(ren) as a result of injuries sustained by an act of domestic violence committed by Respondent.
	☐ I ask Respondent to pay court costs .
	☐ I ask Respondent to pay attorney fees.
4.	☐ Order Respondent to participate in a:
	court-approved counseling program designed to help stop violent behavior.
	substance abuse treatment program.
5.	Other
	☐ Order the full order of protection to automatically renew unless Respondent asks for a hearing
	at least 30 days before the order expires.

Order Respondent to give me wireless teleph completed the Wireless Telephone Number T https://www.courts.mo.gov/file.jsp?id=105013		
Award possession and care of the child(ren)'s medical costs that resulted from abuse of the	s pet(s) to me and order Respondent to pay for pet(s).	
☐ Order my residential address on my voter's re☐ Other (specify):	gistration record to be closed to the public.	
D. Signatures		
I swear or affirm under penalty of perjury that the fact belief. I understand that a copy of my petition will I certify no confidential information is included on	I be served upon Respondent.	
Sign	Date	
Attorney Signature (if applicable)	Date	
Attorney's name, bar number		
Attorney's address, telephone number		