



**INTIMATE PARTNER VIOLENCE/SEXUAL ASSAULT
TEMPORARY RESTRAINING ORDER QUESTIONNAIRE**

Please THOROUGHLY fill out All that Applies to You

PERSON REQUESTING RESTRAINING ORDER (PETITIONER)

Your Name _____ Today's Date _____

Cell/Home Phone # _____ Ok to leave a message? Yes [] No []

Hair Color _____ Eye Color _____ Weight _____ Height _____
Birthdate _____ Age _____ Female [] Male []

Address To Be Used On Your Forms: (If you do not want the Respondent to know your current address, please let the staff know for your safety.)

Address _____ City/Zip _____

Employer _____ Work # _____

SS# _____ Vehicle: Year _____ Make/Model _____

Ethnicity: Caucasian; Hispanic; African American; Asian; Other-Specify _____

Income Source: none, employment, income disability, unemployment, retirement, public assistance, other _____

PERSON TO BE RESTRAINED (RESPONDENT)

Name _____ Cell/Home Phone # _____

Address _____ City/Zip _____

Employer _____ Work Phone # _____

Employer Address _____ City/Zip _____

Alias (Other Names Used) _____ SS# _____

Vehicle: Year _____ Make/Model _____ Color _____

Height _____ Weight _____ Hair Color _____ Eye Color _____

Ethnicity _____ Language Spoken _____

Female [] Male [] Birthdate _____ Age _____

Any Scars or Tattoos?

MAILING ADDRESS

P.O. Box 630
Paso Robles, CA 93447

SAN LUIS OBISPO LOCATION

51 Zaca Lane, Suite 140
San Luis Obispo, CA 93401

PASO ROBLES LOCATION

1030 Vine Street
Paso Robles, CA 93446

CHILDREN IN COMMON WITH RESPONDENT

List any minor children you have in common with the Respondent

First & Last Name	Birthdate	Age	Sex	Ethnicity
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

Do you want your children listed as "Protected People" on the Restraining Order? _____

OTHERS TO BE PROTECTED

ONLY people living with you (such as children from another relationship, family members, roommates) who are in danger from the Respondent, and need protection under this Order

First & Last Name	Birthdate	Age	Sex	Relationship
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Do you have a Private Attorney? Y N Attorneys Name _____

If yes, what type of Court Action are you being represented in? _____

Are there any pending Legal Court Actions between you and the Respondent? Y N

If yes, what type and where? _____ Court Case Number _____

Have you ever called the police on the Respondent, and was the Respondent arrested?

If yes, when and Case Number on report _____

Have you ever Filed a Requested for a Restraining Order against the Respondent before? Y N

If yes, when and where? _____

San Luis Obispo County? Y N

RELATIONSHIP TO RESPONDENT

Please fill out all that applies to you and the Respondent

MARRIAGE

Currently Married to Respondent? Y N
Date of Marriage _____ Date of Separation _____
Divorce/Dissolution Papers Filed? Y N
County _____ Case Number _____
Is your Divorce/Dissolution Final? Y N

DATING RELATIONSHIP

How long was your Dating Relationship with Respondent? _____
Did you and the Respondent live together? Y N
If yes, give dates _____

HISTORY OF ABUSE

Circle types of abuse related to the person you are requesting a protective order against

Verbal; Emotional; Physical; Threat of Physical; Threat of Sexual; Forced Sexual Acts on You; Rape;
Stalking; Hit You; Pushed You; Punched You; Slapped You; Choked You; Kicked You;
Left Bruises on You; Aggressively Grabbed You; Shaken You; Cut You; Burned You;
Thrown Objects at You; Thrown You to the Ground; Thrown You Against a Surface.

Threatened You with a Weapon? _____ If yes what type? _____
Has the Respondent confined you to an area, and not allowed you to leave? Y N
Has the Respondent threatened your life? Y N
Does the Respondent own firearms, or have access to firearms? Y N
If yes, how many _____ what type _____

CONTRIBUTING FACTORS

Does the Respondent have a problem with... ALCOHOL? Y N DRUGS? Y N

If yes, does his/her alcohol and/or drug problem increase the violent behavior? Y N

Does the Respondent have a history of violence towards others? Y N

Has the Respondent taken the child(ren) without your permission, and not allowed you access to them? Y N When and Where? _____

Does the Respondent have a criminal record? Y N

If yes, what crimes has the Respondent been arrested for?

Has the Respondent had a Restraining Order against him/her in the past? Y N

If yes... by who, when and where _____

RECENT ABUSE AND/OR THREATS BY THE RESPONDENT

The "MOST RECENT" incident of abuse occurred (Date): _____

Please describe the incident, and any injuries you suffered from this incident. (You can elaborate on the next page.)

If the Respondent threatened you with any kind of weapon during this incident, please describe the weapon. _____

Were the Police called because of this incident? Y N

By You? Y N Other Person? Y N This persons relationship to you? _____

Was the Respondent arrested because of this incident? Y N

Was an Emergency Protective Order given to you by the Police? Y N

If yes, please provide a copy and/or Case # _____

INFORMATION ON ABUSIVE INCIDENTS

DV Protection Orders Must Accurately State Recent Incidents of Abuse

Describe in your own words, the most recent Abuse/Violence/Threat of Violence against you by the Respondent. Also include information about incidents in the recent past.

Describe Recent Incidents of Abuse, along with WHEN and WHERE, within the "Last 30 Days" (You can elaborate on the incident from the prior page)

Describe Incidents of Abuse, along with WHEN and WHERE, within the "Last Year".

Describe Incidents of Abuse, along with WHEN and WHERE, within the "Last Five Years".

I declare under penalty of perjury, under the laws of the State of California, that the information contained in this questionnaire is true and correct to the best of my knowledge.

Date: _____ Signature: _____

ORDERS YOU WOULD LIKE REQUESTED ON THE TRO

PERSONAL CONDUCT ORDERS

I ask the Court to Order the person I am requesting a Restraining Order against not to do the following.

- A. Harass, attack, strike, threaten, assault (sexually or otherwise), stalk, molest, destroy personal property, keep under surveillance, or block movements.
- B. Contact either directly or indirectly, by telephone, mail, e-mail, or other electronic means.
- C. Exceptions: Brief & peaceful contact as required for Court Ordered Visitation. Unless Criminal Protective Order says otherwise.

STAY AWAY ORDERS

In addition to staying away from you, do you want the Respondent to stay away from any of the following.

- Your children/family/household members listed on page 2? Y N
- Your residence? Y N
- Your place of employment? Y N
- Your School? Y N
- Your children's school and/or childcare? Y N
- Your vehicle? Y N

Other? _____

Will granting any of these stay-away orders prevent the Respondent from getting to his/her residence, work, school, or place of worship? Y N

MOVE OUT ORDERS

If you and the Respondent live in the same household, you may ask the court to order the Respondent to move out (at least temporarily) so that you stay/return to the residence.

Do you need a move out order? Y N

Address of residence _____

If you are asking for a "Move Out Order", why should you be allowed to live at the home, instead of the Respondent?

Circle all that applies

- | | | |
|--|---|---|
| Are you on the rental/lease/mortgage agreement? | Y | N |
| Do you pay or contribute to the rent/mortgage, & utilities for the home? | Y | N |
| Does the Respondent have friends/family with whom he/she can stay? | Y | N |
| Do you have somewhere else you can stay in the area? | Y | N |

Other important information in regards to the Move Out Order:

PROPERTY CONTROL

Possessions:

Are there any major possessions owned/used by both of you, that you need the use of at this moment?

Is there anything that belongs to you that the Respondent has in his/her possession, and you are in need of at this moment?

Debt Payment:

You can ask the Judge to order the Respondent to make payments that are due before the hearing date. This may be important if you share expenses, as your case could take at least two – three weeks to resolve.

Pay to _____ For _____ \$ _____ Due Date _____

Pay to _____ For _____ \$ _____ Due Date _____

Payment for Costs and Services:

You can ask the Judge to order the Respondent to pay for services that were a direct cause due to the Domestic Violence. Example: Damaged property, medical care, counseling, temporary housing. YOU MUST PROVIDE PROOF OF THESE EXPENSES.

Pay to _____ For _____ \$ _____

Pay to _____ For _____ \$ _____

Pay to _____ For _____ \$ _____

CHILD CUSTODY AND VISITATION

If you and the Respondent have minor child(ren) in common, please fill out this page. If you do not, please skip this portion of the questionnaire.

Respondent's paternity of the child(ren) has been established through birth records? Y N

Who are the children currently living with? _____

The children currently reside in what County? _____

Are there any existing Custody Orders or Proceedings involving the child(ren)? Y N

If yes, what kind and where? _____

Does anyone else, other than you and the Respondent, have Physical Custody? Y N

If yes, who? _____

Have the child(ren) lived with anyone else, or in another state during the last five years?

This includes any time they may have spent in foster care or with relatives. Y N

If yes, where and names of caregivers _____

What type of Custody Orders are you requesting in regards to the minor child(ren) in this case?

Sole Legal Custody [] Joint Legal Custody []

Description of Legal Custody: *The person that makes decisions about health, education, & welfare of child(ren)*

Sole Physical Custody [] Joint Physical Custody []

Description of Physical Custody: *The person with whom the child(ren) lives*

Will you be requesting child support? Y N

Are you signed up, or are you going to sign up for child support through Department of Child Support Services? Y N

VISITATION

The court will be making Visitation Orders for two separate time frames. One schedule for the time between filing your Temporary Restraining Order and your Hearing. Then one schedule for after your Hearing, this would be Longer-Term Orders. You might be required to go to Mediation prior to or shortly after your hearing.

Example/Types of Visitation: One evening a week and/or weekends. Example: Every other weekend from Friday at 5:00pm – Sunday at 5:00pm. In almost every circumstance the Judge will grant the Respondent some form of Visitation, unless there will be a danger for the child(ren) to be alone with him/her.

TYPE OF VISITATION PRIOR TO YOUR HEARING?

1. No Visitation? Y N
This is rarely granted by the Court, unless there is a danger to the child(ren) if they were to be alone with the Respondent
2. Supervised Visitation? Professional [] Nonprofessional []
If you are requesting Nonprofessional, please give information in regards to this person
Name _____
Address _____ Phone _____
Location of Visitation _____
3. If not Supervised Visitation PRIOR TO HEARING, please specify Visitation schedule.

TYPE OF VISITATION AFTER YOUR HEARING.

1. No Visitation? Y N
2. Supervised visitation? Professional [] Nonprofessional []
If you will be requesting Nonprofessional, make sure you give information in regards to this person in the area above
3. If not Supervised Visitation AFTER YOUR HEARING, please specify Visitation schedule.

Do you have any Visitation Orders in affect at the moment?

Y N

Please describe Visitation Schedule:

NO TRAVEL ORDER REQUESTED FOR RESPONDENT

***COMPLETE IF THERE IS A RISK THAT THE RESPONDENT MIGHT TAKE THE CHILD(REN)
WITHOUT PERMISSION.***

Mark all that apply to the Respondent:

- Violated or threatened to violate a custody & visitation order in the past.
- Does not have strong ties to California.
- Quit his/her job.
- Closed bank accounts.
- Sold or gotten rid of assets.
- Sold his/her home.
- Ended a lease.
- Hidden or destroyed documents.
- Applied for a passport, birth certificate or medical records.

Has a history of:

- Domestic violence.
- Child abuse.
- Not cooperating with the parenting of minor child(ren).
- Has taken the child(ren) without permission in the past.
- Has family or emotional ties in another County, State or Foreign Country.

Name County, State or Foreign Country_____

- Has a criminal record.

Explain:_____