

Petition for Relief from Domestic Abuse

Read *Protect Yourself from Domestic Violence* on the Iowa Judicial Branch website before using this form. The booklet explains court procedures and provides information about how to contact an attorney.

You may want to or should see an attorney:

- If you do not know how to use this form, or if you do not understand this form.
- If you think Defendant will hire an attorney.
- If you think Defendant will try to get custody of your children.
- You may involve an attorney in this process at any time, although you are not required to.

Caution: You must provide any protected or confidential information in full on a separate Protected Information Disclosure form.

For other general information about domestic abuse, call the confidential **Iowa Domestic Violence Hotline: 1-800-942-0333**.

In the Iowa District Court for _____ County

County where the Petition is filed

Plaintiff
Full name of person seeking relief from domestic abuse

VS.

Defendant
Full name of alleged domestic abuser

Civil no. _____

Leave blank – Clerk of court will fill in

Petition for Relief from Domestic Abuse

Iowa Code ch. 236

If you need assistance to participate in court due to a disability, contact the disability coordinator (information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/). **Disability coordinators cannot provide legal advice.** Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942).

1. I, Plaintiff, understand that this action is being filed under Iowa Code chapter 236.
2. I now live in _____ County, Iowa.
3. I can receive mail at the following address: *Any of the following addresses may be used: a mailing address, the mailing address of a shelter or other agency, a public or private post office box, or any other mailing address with permission of the resident of that address.*

Plaintiff's Mailing address _____
City _____
State _____
ZIP code _____
County

4. Defendant lives at the following address (if known):

Defendant's home address _____
City _____
State _____
ZIP code _____
County

5. Defendant's employer and work address (if known):

Employer

Defendant's work address _____
City _____
State _____
ZIP code _____
County

6. Defendant is 17 years of age or younger (if known): Yes No

If yes, provide Defendant's year of birth: _____

yyyy

7. Identification and age of each child under age 18 whose welfare may be affected by this controversy: Use a Protected Information Disclosure form to provide full names and birthdates to the court.

| First, middle, and last initials of each child | Birth year | First, middle, and last initials of each child | Birth year |
|--|------------|--|------------|
| A. | | D. | |
| B. | | E. | |
| C. | | F. | |

Check this box if you have attached sheets with additional information.

8. Relationship of Plaintiff and Defendant at the time of the abuse or threat of abuse:
Check only one

- | | |
|--|--|
| A. <input type="checkbox"/> Married | F. <input type="checkbox"/> Living together |
| B. <input type="checkbox"/> Separated | G. <input type="checkbox"/> Lived together within one year of the assault, but not at the time of the assault |
| C. <input type="checkbox"/> Divorced | H. <input type="checkbox"/> Intimate relationship* |
| D. <input type="checkbox"/> Adult relatives living together | I. <input type="checkbox"/> Have been in an intimate relationship and have had contact within one year of the assault* |
| E. <input type="checkbox"/> Parents of the same minor child or children under age 18 | |

*An "intimate relationship" means a significant romantic involvement that need not include sexual involvement. An intimate relationship does not include a casual social relationship or association in a business or professional capacity.

Note: If none of these boxes accurately describes your relationship, do not complete this form. Contact an attorney or call the police about your abuse.

9. Nature of the alleged domestic abuse
Check all that apply

- A. Defendant has physically abused me.
- B. Defendant has sexually abused me.
- C. Defendant has threatened me, and I fear for my physical safety.

10. Injuries

- A. Describe the **most recent injury**, including threats and any nonconsensual (against your will) sexual experience. Please describe **how** the injury or threat happened, **where** it happened, and **when** you were injured or threatened.

Check this box if you have attached sheets with additional information.

- B. Describe any **other injuries** or threats you have received from Defendant. Please include **how** you were injured or threatened, **where** it happened, and **when** you were injured or threatened.

Check this box if you have attached sheets with additional information.

Questions 11-18: If Plaintiff and Defendant have no children in common (biological or adopted) under age 18, skip questions 11 through 18.

Questions 11-18 relate to the Uniform Child Custody Jurisdiction and Enforcement Act and to the court's duty under Iowa Code section 236.5(1)(b)(5) (2013). If you are unsure how to answer these questions, contact a lawyer for advice.

- 11.** Who should have temporary custody of the minor children you have in common with Defendant? *Check one*

Me (Plaintiff) Defendant Other *Identify* _____

- 12.** Explain how your safety and your children's safety will be affected by the court's decision about temporary custody or temporary visitation:

- 13.** If you want custody, provide suggestions for how Defendant could visit the children without contacting you—for example: through friends, relatives, or baby-sitters. List any concerns you may have about visitation:

- 14.** Identify the minor children (under age 18) you have in common with Defendant.

Give each child's initials, address, and birth year. If children are living in a shelter or other safe place, give only the county and state where they are living.

| Child's initials | Present address (or county/state) | Birth year |
|------------------|-----------------------------------|------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

15. If the children have lived with other people during the last five years, list those other persons and places:

| Child's initials | Person(s) lived with in last 5 years | Address at that time | From when to when |
|------------------|--------------------------------------|----------------------|-------------------|
| _____ | _____ | _____ | _____ to _____ |
| _____ | _____ | _____ | _____ to _____ |
| _____ | _____ | _____ | _____ to _____ |
| _____ | _____ | _____ | _____ to _____ |

Check this box if you have attached sheets with additional information accounting for each child's living situations over the last five years.

16. Give the present address of each adult listed in question 15, above:

| Person(s) child lived with (other than you) | Present address |
|---|-----------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

17. Has there ever been any court case concerning custody of the minor children you have in common with Defendant in Iowa or any other state? Yes No

If yes, explain: _____

18. Do you, Plaintiff, know of any other person who has physical custody of the minor children or claims to have custody or visitation rights with respect to the children?

Yes No

If yes, explain: _____

Check this box if you have attached sheets with additional information.

Continued on next page

19. Request for Court Order

You may get two kinds of orders. A short-term order lasts until a hearing is held (within 15 days). A long-term order lasts up to one year, and is issued only after a full hearing. You can ask for either or both types of orders.

Plaintiff asks the court to do the following: *Check all that apply*

- A. **I request that the judge** immediately issue an Emergency or a Temporary Protective Order to protect me before the hearing because I am in present danger of domestic abuse. I request that the judge order Defendant to: *Check all that apply*

- (1) Stop the domestic abuse.
- (2) Stay away from my home or the family home.
- (3) Stay away from my work or school.
- (4) Not contact me either personally or through another person, whether by telephone, social media, writing, or any other way.
- (5) Give me temporary possession of the family home or provide other housing.
- (6) Give me temporary possession of the family car.

Specify make, model, year, if known: _____

- (7) Give me temporary custody of the children, with appropriate visitation for Defendant
- (8) Give me temporary financial support.
- (9) Other *Specify:* _____

- B. **I request that the judge** set a hearing on this Petition; direct the sheriff to serve Defendant a copy of this Petition with a copy of the Order for Hearing; and following the hearing, issue a Protective Order (effective for up to one year). I request that the judge order the sheriff to serve Defendant with a copy of any Protective Order issued. I request that the judge grant any relief authorized by law, including ordering Defendant to:

Check all that apply

- (1) Stop the domestic abuse.
- (2) Stay away from my home or the family home.
- (3) Stay away from my work or school.
- (4) Not contact me either personally or through another person, whether by telephone, social media, writing, or any other way.
- (5) Give me possession of the family home or provide other housing.
- (6) Give me possession of the family car.

Specify make, model, and year, if known: _____

- (7) Give me temporary custody of the children, with appropriate visitation for Defendant.
- (8) Give me financial support.
- (9) Take part in counseling.
- (10) Other *Specify:* _____

Note: If you change your mind about any of these requests, you must tell the judge at the hearing. The hearing will occur five to fifteen days after you file this Petition. You may cancel any of the requests made in this Petition. You may also ask the judge to grant you any of the requests, even if you did not mark them on this Petition.

20. Plaintiff's Understanding of this Petition—Read Before Signing

When Plaintiff files this Petition with the court, several legal matters are set into motion.

Check each statement below after reading it.

I understand that there will be a court hearing 5 to 15 days after I file this Petition.

I understand that a law enforcement officer will give Defendant a copy of this Petition, if Defendant can be found, and that Defendant will receive other relevant court papers.

I understand that I must attend the hearing. If I change my mind and do not want a Protective Order, I should fill out and file with the clerk of court a "Motion to Dismiss" before the scheduled hearing. (This form can be picked up at the clerk of court's office.)

I understand that if I do not attend the hearing, or if I file a "Motion to Dismiss," the judge could allow Defendant to present testimony and might give Defendant what Defendant asks for, such as custody of the children or the home. If I file a "Motion to Dismiss," the judge can dismiss the Emergency or a Temporary Protective Order so that it will no longer have any effect.

I understand that the hearing is my opportunity to tell the judge how I was hurt or threatened, where it happened, and when it happened. I can bring people with me to the hearing who saw Defendant abusing me or saw my injuries. I can bring any evidence I have that shows I have been abused, such as medical reports, pictures, pulled hair, or anything else that might help convince the judge that I need a Protective Order.

I understand that the court will give primary consideration to the safety of me and my children. I should tell the judge how we will be in danger if Defendant is given temporary custody or unrestricted visitation.

I understand that the hearing is my opportunity to tell the judge whether paying court costs would hurt my ability to pay for my needs or my children's needs. I should be ready to provide financial information at the hearing, such as income and living expenses and other expenses.

I understand that the Protective Order could be in effect for up to one year. I also understand that if the Protective Order is granted, it may be extended beyond one year by filing for an extension before the Protective Order expires.

I understand that if I believe that the Protective Order has been violated, I can bring this to the court's attention by filling out and filing with the clerk of court an "Affidavit to Start Contempt Proceedings." (This form can be picked up at the clerk of court's office and is available on the Iowa Judicial Branch website.)

I understand that if a Protective Order is issued, peace officers can use every reasonable means to enforce the Protective Order, including taking Defendant into immediate custody, and that if a court finds that Defendant has violated the Protective Order, Defendant could be put in jail and have to pay a fine. **I also understand** that I could be arrested and jailed for aiding and abetting Defendant's violation of the Protective Order.

I understand that a Protective Order is a serious legal action. If I want to change any part of the Protective Order, I should go back and tell the judge. I should fill out and file with the clerk of court a "Request to Cancel or Change a Chapter 236 Protective Order." (This form can be picked up at the clerk of court's office and is available on the Iowa Judicial Branch website.)

21. Notice of Protected or Confidential Information

Pursuant to Iowa Code section 236.10, this file is a public record and accessible by anyone. If you would like all or part of this file to remain confidential to the general public in order to protect the safety or privacy of any person, then you must request the court to seal all or part of this file.* The person from whom you are seeking relief will have access to the file, even if it is sealed.

Check all that apply if you want this file sealed:

- I request all portions of this file to be sealed.
- I request that my county of residence and mailing address be sealed.
- I request that the names and addresses of: my children or wards, or children's or ward's minor children be sealed.
- Other request: *Please specify:* _____

**Court orders and support payment records cannot be sealed. The court may, upon request, order that address and location information be redacted from those records.*

It is the responsibility of the party filing a document or exhibit with the court to ensure that protected or confidential information is omitted from or abbreviated on the document or exhibit. See Iowa Court Rule 16.602. Protected information (for example, children's full names or social security numbers) should be abbreviated on this form and provided in full on a Protected Information Disclosure form.

22. Oath and Signature

I, _____, have read this Petition, and I certify under penalty of
Print your full name: first, middle, last
perjury and pursuant to the laws of the State of Iowa that the information I have provided in this Petition is true and correct.

_____, 20____
*Month Day Year Plaintiff's signature**

Mailing address City State ZIP code

(_____) _____
Phone number Email address Additional email address, if applicable

**Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.*

For other general information about domestic abuse,
call the confidential
Iowa Domestic Abuse Hotline:
1-800-942-0333