

You must provide a government-issued ID in order to have your signature notarized. Petitions will not be filed without a notarized signature.

GENERAL INSTRUCTIONS
FOR THOSE SEEKING A PROTECTION FROM STALKING ORDER

NOTICE

The protection from stalking 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 stalking at <http://www.kcsdv.org/pfs.html>.

1. You may seek a protection from stalking order:
 - a. For yourself; or,
 - b. For your minor child; or,
 - c. For a minor child who resides with you.

2. For each person for whom protection is sought, Kansas Law requires that stalking must have occurred.

“Stalking” is an intentional harassment of another person that places the other person in reasonable fear for that person’s safety.

“Harassment” is a knowing and intentional course of conduct directed at a specific person that seriously alarms, annoys, torments or terrorizes the person and that serves no legitimate purpose.

“Course of conduct” is conduct consisting of two or more separate acts over a period of time, however short, that show a continuity of purpose which would cause a reasonable person to suffer substantial emotional distress.

3. You must file the petition for protection from stalking in the county where the stalking has occurred.

4. You must notify the defendant by personal service that you have filed a Petition for a Protection from Stalking Order. To obtain personal service, you must fill out a Request for Service Form, requesting that the sheriff deliver the Petition for Protection from Stalking to the defendant.

5. If the defendant is a minor, you must complete the Minor Defendant Addendum. Petitions, Motions and Temporary Protection from Stalking 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.

6. You should be available to testify at future hearings as set by the judge. If you fail to appear, the case may be dismissed.
7. A Final Protection from Stalking Order will expire after one year or on the date stated in the order, unless you request an extension or modification from the court.

IN THE DISTRICT COURT OF DOUGLAS COUNTY, KANSAS

_____, Plaintiff

vs.

Case No. _____

_____, Defendant

PROTECTION FROM STALKING CONFIDENTIAL ADDRESS FORM

(K.S.A. 60-31a04(e))

NOTE: THIS FORM WILL BE SHOWN ONLY TO AUTHORIZED COURT OR LAW ENFORCEMENT PERSONNEL. THIS FORM 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 _____

Plaintiff

vs.

Case No. _____

Div. No. _____

Defendant

PERSONAL AND SERVICE DATA SHEET

The purpose of this sheet is to provide the Sheriff's Department with the necessary information to effect service on Defendant and to provide essential information for the safety of the Sheriff's Deputy. Information about Defendant is voluntary on the part of the Plaintiff, except physical description and information. In addition, this page establishes a contact number for returning keys to the residence, re-entering the house, or obtaining custody of any children involved. This page is for the Court and Sheriff's use only and will not be part of the packet served to Defendant. **PRINT CLEARLY.**

PLAINTIFF'S INFORMATION (YOU)

Plaintiff's Name: _____

Plaintiff's Address: _____

Phone Number where Plaintiff can be contacted: _____

Does Defendant have keys to your current residence? _____

Do you want your address kept confidential so Defendant cannot obtain this information? _____

Physical Description of **PLAINTIFF (You)**:

Race: _____ Sex: _____ Age: _____ Date of Birth: _____

Height: _____ Weight: _____ Hair: _____ Eyes: _____

DEFENDANT'S INFORMATION

Defendant's Name: _____

Other name(s) Defendant may go by/be known as: _____

Defendant's Social Security Number (if known): _____

Name of Defendant's Employer: _____

Defendant's Work Hours: _____

Does Defendant Operate a Business from his/her Home? _____

Does Defendant require a language interpreter? ___ Yes ___ No

If so, what language? _____

Physical Description of **Defendant**: (Please attach current photo if available)

Race: _____ Sex: _____ Age: _____ Date of Birth: _____

Height: _____ Weight: _____ Hair Color/Length: _____

Eye Color: _____ Glasses? _____ Other Identifying Characteristics (i.e. scars, tattoos, etc.) _____

Description of Defendant's Vehicle: _____

Places Defendant is likely to be found: _____

Has Defendant been arrested? _____

If so, why? _____

Does Defendant own any weapons? _____

If so, what kinds? _____

Does Defendant have a history of drug or alcohol abuse? _____

If so, please explain: _____

Does Defendant have a history of domestic violence? _____

If so, please explain: _____

Does Defendant have a history of mental illness? _____

If so, please explain: _____

The defendant can be found at: (give 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:

Please explain _____
Street _____
City _____ State _____ Zip Code _____
Phone number _____
Times when defendant is usually there _____

IN THE DISTRICT COURT OF DOUGLAS COUNTY, KANSAS

_____,
Plaintiff

vs.

Case No. _____

_____,
Defendant

PETITION FOR PROTECTION FROM STALKING ORDER

(K.S.A. 60-31a01 *et seq.*)

1. Plaintiff seeks an order for protection from stalking for:
 myself; or
 my minor child (under age 18); or
 a minor child who lives with me.
2. The minor child for whom Plaintiff seeks protection is: (give full name and year of birth)

NAME

YOB

3. Defendant, _____ (name), 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 _____

4. Describe the incidents of stalking. Include specific facts, dates and locations:
Incident #1: _____

Incident #2: _____

Additional Incident(s), if any:

(Attach additional pages as needed.)

5. Plaintiff needs a protection from stalking order because: _____

6. The stalking occurred in this county.

7. Plaintiff requests that the Court issue an Ex Parte Temporary Order of Protection and Final Order of Protection restraining defendant from:

following, harassing, telephoning, contacting or otherwise communicating with the protected person

abusing, molesting or interfering with the privacy or rights of the protected person

entering or coming on or around the premises or the residence of the protected person 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 it is to remain confidential.)

8. The court shall give copies of orders to the appropriate law enforcement agencies; set a date, time and hearing on this matter; and issue summons to Defendant, notifying Defendant of this action and the relief requested.

9. After a hearing, the court should issue a final order of protection prohibiting Defendant from committing any acts of stalking against the protected person; order Defendant to pay court costs and attorney fees if appropriate; and order any other relief necessary for the safety of the protected person including:

Plaintiff's signature

Plaintiff's Name: _____

(DO NOT include the residential address of the Plaintiff in this petition if it is to remain confidential. If the address is to remain confidential, Plaintiff must complete the Protection from Stalking Confidential Address Form and include it with this petition.)

Attorney representing Plaintiff (if any)

Attorney's Name: _____

Address 1: _____

Address 2: _____

City, State, Zip: _____

Telephone: _____

VERIFICATION

STATE OF _____)

) ss:

COUNTY OF _____)

I swear or affirm that the statements made in this Petition are true and correct to the best of my knowledge and belief and that I am the person filing this petition.

Plaintiff's signature

SUBSCRIBED AND SWORN to before me, a Notary Public, this _____ day of _____ 20_____.

Notary Public

My Appointment Expires: _____

COMPLETE IF SERVING DEFENDANT AT PLACE OF EMPLOYMENT

IN THE DISTRICT COURT OF DOUGLAS COUNTY, KANSAS

Plaintiff

Vs.

Case No. _____

Div. No. _____

Defendant

AFFIDAVIT AND REQUEST FOR SERVICE AT PLACE OF EMPLOYMENT

STATE OF KANSAS)
) ss:
COUNTY OF DOUGLAS)

I, _____, Plaintiff, having been duly sworn on oath, state as follows:

I request that the defendant be served at his place of employment because: [Please check one]

_____ the defendant is a non-resident who is employed in the State.

_____ the defendant's place of residence is unknown.

Please serve the defendant by **personal service only** at:

Name of employer: _____

Address of employer: _____

Plaintiff's signature

Subscribed and sworn to before me this _____ day of _____, 20____

Deputy Clerk of District Court/Notary Public

My Appointment Expires: _____