

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO. (Optional): _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY Draft 11 06/12/09 XYZ Not approved by the Judicial Council
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CHILD'S NAME:	CASE NUMBERS: JUVENILE: FAMILY:
REQUEST FOR RESTRAINING ORDER— JUVENILE DELINQUENCY	RELATED CASES (if any):

1. **Person to be protected** (If seeking protection from an adult, the child in item 3 or any other child in the household; If seeking protection from the child in item 1, any person):

Name _____ Sex _____ Age _____

2. a. **Person to be restrained** (full name):

b. **DESCRIPTION:**

Sex: M F Ht.: _____ Wt.: _____ Hair color: _____ Eye color: _____ Race: _____ Age: _____ Date of birth: _____

3. The child is

- a. a ward of the court under Welfare and Institutions Code section 601; or
- b. a ward of the court under Welfare and Institutions Code section 602; or
- c. the subject of a petition that has been filed in this court under Welfare and Institutions Code section 601; or
- d. the subject of a petition that has been filed in this court under Welfare and Institutions Code section 602.

4. Petitioner is the

- a. mother.
- b. father.
- c. child.
- d. guardian.
- e. social worker.
- f. probation officer.
- g. present caregiver of child.
- h. court-appointed special advocate.
- i. representative of Indian child's tribe.
- j. other (state interest or relationship to child):

5. The person to be restrained has (check at least one box):

- a. assaulted or attempted to assault one or more of the persons to be protected.
- b. caused, threatened, or attempted bodily injury on one or more of the persons to be protected.
- c. caused one or more of the persons to be protected to fear physical or emotional harm.
- d. sexually assaulted or attempted to sexually assault one or more of the persons to be protected.
- e. stalked one or more of the persons to be protected.
- f. other (specify):

as described in item 6

as described in attached report by: police officer social worker probation officer
 other (specify):

CASE NAME: _____	CASE NUMBERS: JUVENILE: FAMILY:
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6. **Description of conduct** (*describe in detail the most recent incidents supporting this application or attach copies of reports of law enforcement officers, social workers, probation officers, or other professional persons*):

7. A criminal protective order on Form CR-160 is in effect:
- a. case number (*specify*): _____ (*expiration date*): _____
 - b. specify county (*if known*): _____
 - c. Person protected by order: _____
 - d. Person restrained by order: _____

8. **Requested personal conduct orders for adults**

a. Restrained person must not molest, attack, sexually assault, stalk, or batter any person named in item 1.

b. Restrained person must move immediately from (*address*):

and take only personal clothing and effects.

c. Restrained person must not take any action to get the address or location of any person named in item 1 or the addresses or locations of the family members, caregivers, or guardians of any persons named in item 1. (*If item c is not checked, the court has found good cause not to make this order.*)
Peaceful written contact through a lawyer or through a process server or another person in order to serve legal papers is allowed and does not violate this order.

d. Restrained person must sell or give up any firearms that he or she has or controls for a period not to exceed the duration of the restraining order. Describe in item 6 any use of or threat regarding use of firearms. Petitioner believes the restrained person has the following firearms (*specify*):

e. Other requested orders:

CASE NAME: _____	CASE NUMBERS: JUVENILE: FAMILY:
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9. Requested personal conduct orders for children

- a. The child is a ward or the subject of a petition under Welfare and Institutions Code section 601 or 602 and must not contact, threaten, stalk, or disturb the peace of *(list names)*:

I declare under penalty of perjury under the laws of the State of California that the foregoing and all attachments are true and correct.

Date:

(TYPE OR PRINT NAME)

▶ _____
(SIGNATURE OF PETITIONER)