



IN THE \_\_\_\_\_ JUDICIAL CIRCUIT, \_\_\_\_\_ COUNTY, MISSOURI

## Petition for Order of Protection – Child

**Notice to Petitioner: Respondent will receive a copy of this petition with service.**

Use this form when one child is involved with this case. Use CP42 for two to five children and CP41 for six to ten children.

Judge or Division:	<b>Case Number:</b>
	Court ORI Number:
<b>Petitioner:</b>	MSHP Number:
	Responsible Law Enforcement ORI:
	Related Cases:
Protected Child: Age of Protected Child: Sex: <input type="checkbox"/> F <input type="checkbox"/> M Race:	(Date File Stamp)
<b>vs.</b>	<b>Protected Child's Relationship to Respondent pursuant to 18 U.S.C. §§ 921(a)(32) and 922(g)(8) determination:</b>
<b>Respondent:</b>	Protected Child's Relationship to Respondent:
Alias/Nicknames:	<input type="checkbox"/> Child <input type="checkbox"/> Step-Child or Former Step-Child
	<input type="checkbox"/> Parent is Unmarried, Intimate Residing/Resided with Respondent
	<input type="checkbox"/> Other (specify) _____
Respondent's DOB:	Respondent's Home Address:
Age:	
SSN (if known, last four digits):	Home Phone Number:
Race: Sex: <input type="checkbox"/> F <input type="checkbox"/> M	Respondent's Work Address:
Hair Color: Height:	
Eye Color: Weight:	Work Phone Number:
(Identifying Information for use by Law Enforcement)	Work Hours:
Visible Identifying Marks (e.g., tattoos, birthmarks, braces, mustache, beard, pierced ear, glasses):	Other Locations Where Respondent May Be Served:

### I. PROTECTED CHILD INFORMATION

- I am Petitioner and the: (check appropriate boxes)
  - ☐ parent or guardian of the child.
  - ☐ guardian ad litem for the child.
  - ☐ court appointed special advocate for the child.
  - ☐ juvenile officer.
- Respondent is:
  - ☐ a household member who is residing with the child.
  - ☐ a household member who resided with the child in the past.
  - ☐ an emancipated child who is residing with the child.
  - ☐ an emancipated child who resided with the child in the past.
  - ☐ stalking the child.
  - ☐ a household member under 17 who is residing with the child.
  - ☐ a household member under 17 who resided with the child.
  - ☐ a person under 17 stalking the child.
  - ☐ sexually assaulting the child.
- The act(s) of domestic violence, stalking, or sexual assault occurred at \_\_\_\_\_ (address) \_\_\_\_\_ (city) \_\_\_\_\_ (County/City of St. Louis), MO.
- a. The county in which this petition is being filed is where the ☐ protected child lives ☐ respondent may be served ☐ act(s) of domestic violence, stalking, or sexual assault occurred. (check appropriate boxes)
- ☐ There are no prior or pending custody orders for this child.  
☐ There is a prior or pending custody order for this child.
- The family home of the child is: (check appropriate boxes)
  - ☐ owned ☐ leased ☐ rented
  - By: ☐ Respondent ☐ Petitioner ☐ Other (name) \_\_\_\_\_
  - Occupied by: (include name only if different from above) \_\_\_\_\_.

6. Respondent has knowingly and intentionally: (check at least one)

- |                                                                                                            |                                                                 |
|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| <input type="checkbox"/> caused or attempted to cause physical harm to the child                           | <input type="checkbox"/> sexually assaulted the child           |
| <input type="checkbox"/> placed or attempted to place the child in apprehension of immediate physical harm | <input type="checkbox"/> unlawfully imprisoned the child        |
| <input type="checkbox"/> coerced the child                                                                 | <input type="checkbox"/> followed the child from place to place |
| <input type="checkbox"/> stalked the child                                                                 | <input type="checkbox"/> abused the child's pet(s)              |
| <input type="checkbox"/> harassed the child                                                                | <input type="checkbox"/> threatened to do any of the above      |

by the following acts: (Include the most recent date(s) of the acts described.)

7. An immediate and present danger of domestic violence, stalking, or sexual assault to the child exists because: (describe)

## II. RESPONDENT INFORMATION

8. Respondent is ☐ at least 17 years of age or emancipated ☐ under 17.

9. Respondent may be found in \_\_\_\_\_ (city),  
\_\_\_\_\_ (state), in the County of \_\_\_\_\_.

## III. CUSTODY

The court cannot change custody if a prior order regarding custody is pending or has been made.

10. It is in the best interest of the child that custody be awarded as follows:

<u>Child's Name</u>	<u>Relationship to Parties</u>	<u>Person to Receive Custody</u>	<u>Temporary</u>	<u>Full</u>
_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

11. Indicate any prior or pending custody court cases before, or orders entered by, this court or any other court involving the following parties.

(If none, so state):

- a. Petitioner: \_\_\_\_\_
- b. Respondent: \_\_\_\_\_
- c. Child (identified in item 10): \_\_\_\_\_

12. ☐ Award visitation with the child as follows:

## IV. PETITIONER'S REQUESTS

13. Pursuant to chapter 455, RSMo, it is requested that the court issue an Ex Parte Order of Protection restraining Respondent from: (check boxes that apply)

- ☐ Committing or threatening to commit domestic violence, stalking, sexual assault, molesting, or disturbing the peace of the protected child(ren).
- ☐ Abusing or threatening to abuse the protected child(ren)'s pet(s).
- ☐ Having any contact with the protected child(ren), except as specifically authorized by this Order.
- ☐ Entering the family home of the protected child(ren), located at \_\_\_\_\_.
- ☐ Entering the place of employment or school of the protected child(ren), located at \_\_\_\_\_.
- ☐ Communicating with the protected child(ren) in any manner or through any medium.
- ☐ Come within \_\_\_\_\_ (feet) of the protected child(ren).
- ☐ Other: \_\_\_\_\_

14. ☐ It is further requested that the Ex Parte Order of Protection exclude Respondent from the family home of the protected child(ren) because:
- It is in the best interest of the child(ren) remaining in the home;
  - A substantial risk to the child(ren) exists unless Respondent is excluded;
  - A remaining adult family or household member is able to care adequately for the child(ren) in the absence of Respondent; and
  - A commitment has been obtained from the Children's Division to provide appropriate social services to the family or household members during the period of time during which an Order of Protection is in effect.
15. ☐ Exclusion of Respondent from the family home of the protected child(ren) is not being requested.

#### **Additional Requests:**

16. It is further requested that, upon the hearing of this cause, the court also issue a Full Order of Protection - Child enjoining Respondent from the above acts for such time as is necessary to protect the protected child(ren) and that the court:
- ☐ Order Respondent not to commit or threaten to commit domestic violence, stalking, sexual assault, molesting, or disturbing the peace of the protected child(ren), or abusing a pet.
- ☐ Order Respondent not to have any contact with the protected child(ren), except as specifically authorized by this order.
- ☐ Order Respondent not to enter the family home, place of employment or school of the protected child(ren), except as specifically authorized by this order.
- ☐ Award custody of the child(ren) to \_\_\_\_\_.

#### **Child Support/Maintenance**

17. ☐ Order Respondent to pay child support in the amount of \$ \_\_\_\_\_ (check one) ☐ per week ☐ per month.
18. ☐ Order Respondent to pay maintenance in the amount of \$ \_\_\_\_\_ (check one) ☐ per week ☐ per month.

#### **Other Support**

19. ☐ Order Respondent to make or continue to make the rent or mortgage payments to the residence occupied by the protected child(ren) in the amount of \$ \_\_\_\_\_ ☐ per week ☐ per month.
20. ☐ Order Respondent to pay a reasonable fee for housing and other services provided to the protected child(ren) by a shelter for victims of domestic violence.
21. ☐ Order Respondent to pay the cost of medical treatment or services provided to protected child(ren) as a result of injuries sustained by an act of domestic violence committed by Respondent.

#### **Counseling/Treatment**

22. ☐ Order Respondent to participate in a court-approved counseling program designed to help batterers stop violent behavior or a substance abuse program.

#### **Costs/Fees**

23. ☐ Order Respondent to pay court costs.
24. ☐ Order Respondent to pay Petitioner's attorney fees.

#### **Other**

25. ☐ Order the full order of protection issued for one year be automatically renewed unless Respondent requests a hearing by 30 days prior to the expiration of the order.
26. ☐ Petitioner to receive wireless telephone number(s) and billing responsibilities from Respondent. (Note: If checked, complete the Wireless Telephone Number Transfer Addendum form.)
27. ☐ Award possession and care of any pet(s), along with any moneys necessary to cover medical costs that may have resulted from abuse of the pet(s).
28. ☐ I believe that revealing my address will endanger myself or the protected child(ren). (Note: If checked, complete the Child Protection Petitioner and Protected Child Information (Confidential Record) form.)
29. ☐ Order Petitioner's residential address on voter's registration record be closed to the public.
30. ☐ Other (specify): \_\_\_\_\_

## V. PETITIONER'S SIGNATURE

I swear/affirm under penalty of perjury that these facts are true according to my best knowledge and belief.  
**I understand that a copy of this petition will be served on Respondent.**

\_\_\_\_\_  
Date

**NOTICE:** Section 455.510.3, RSMo, provides that a petitioner seeking protection under the Child Protection Orders Act is not required to reveal any current address or place of residence of the child on this petition. **Do not provide this information if doing so will endanger the child.**

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Address (Optional)

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Attorney's Name, Missouri Bar No., if Applicable

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State and Zip

\_\_\_\_\_  
Telephone