



WOMEN'S ADVOCACY PROJECT

**PRO SE
SEXUAL ASSAULT
PROTECTIVE ORDER
PACKET**

**FUNDED BY A GRANT FROM THE OFFICE OF THE TEXAS
ATTORNEY GENERAL, CRIME VICTIM SERVICES DIVISION.
PRODUCED BY THE WOMEN'S ADVOCACY PROJECT, INC. IN
COLLABORATION WITH THE TEXAS ASSOCIATION AGAINST
SEXUAL ASSAULT (TAASA).**

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Sexual Assault Legal Hotline
888-296-SAFE

Family Violence Legal Line
800-374-HOPE

Family Law Hotline
800-777-FAIR

www.women-law.org

DISCLAIMER

Although care has been taken to ensure the accuracy of the information and forms contained in this packet, neither the Women's Advocacy Project, TAASA, nor the authors assume any liability in connections with any use of the information or forms contained herein. If you have any questions about this packet, please call the Women's Advocacy Project at 1-888-296-SAFE for information.

A Protective Order has limitations. Some respondents may refuse to abide by the terms of a Protective Order. Please contact your local rape crisis center or women's shelter for assistance with planning for safety surrounding a Protective Order proceeding. If you need the number to your local shelter, call the Women's Advocacy Project.

Filling out some parts of these forms and going through this process may be very upsetting for survivors of sexual violence. For additional counseling and support, the authors encourage anyone using this packet to contact their local rape crisis center or women's shelter for help and support, or call the Rape, Abuse, and Incest National Network ("RAINN") hotline at 1-800-656-HOPE, which can put survivors in touch with local resources.

Throughout this Pro Se Protective Order packet, female pronouns are used to refer to victims of sexual assault, and male pronouns for perpetrators. This method was chosen because it reflects the vast majority of sexual violence crimes in Texas, as published in the annual reports of the Texas Department of Public Safety. It is not meant to exclude the use of the packet by male victims of sexual violence, nor is it intended to suggest that all victims are female, or that there are no male victims in Texas. The packet is made available free of charge to all victims of sexual violence through our state, and persons are encouraged to use the packet regardless of their gender.

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**PRO SE
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GENERAL INSTRUCTIONS

GENERAL INSTRUCTIONS

In this packet, you have copies of the following forms:

1. Application for Sexual Assault Protective Order;
2. Respondent Information Form
3. Temporary Ex Parte Sexual Assault Protective Order and Show Cause Order;
4. Order Extending Temporary Ex Parte Sexual Assault Protective Order; and
5. Sexual Assault Protective Order.

PLEASE BE ADVISED THAT THIS PACKET IS AVAILABLE FOR FREE IN BOTH ENGLISH AND SPANISH. IF YOU WISH TO RECEIVE A PACKET IN SPANISH, PLEASE CONTACT THE WOMEN'S ADVOCACY PROJECT, INC. AT 1-888-296-SAFE (1-888-296-7233), OR IN AUSTIN CALL 512-225-9290.

LE INFORMAMOS QUE ESTE PAQUETE ESTA DISPONIBLE GRATUITAMENTE EN INGLÉS Y EN ESPAÑOL. SI DESEA RECIBIR UN PAQUETE EN ESPAÑOL, POR FAVOR COMUNÍQUESE AL PROYECTO DE ABOGACÍA PARA MUJERES (WOMEN'S ADVOCACY PROJECT, INC.) AL 1-888-296-SAFE (1-888-296-7233), O EN AUSTIN LLAME AL 512-225-9290. TIENEN ABOGADAS QUIENES HABLAN ESPAÑOL.

The first form, called Application for Sexual Assault Protective Order, asks you to explain what happened to you in detail. *This section is what the judge will read to decide whether to grant your Protective Order.* This first form is your chance to tell the judge what happened. Therefore, you should think carefully before you fill that form out.

In order to get a Sexual Assault Protective Order (the fifth form), you must show that: (1) you are a victim of sexual assault as defined by Texas law, and (2) you are afraid that the same person may hurt you again.

The third and fourth forms will not always be necessary. **IT IS VERY IMPORTANT THAT YOU CAREFULLY REFER TO AND FOLLOW THE INSTRUCTIONS IN THE BOXES AT THE MARGIN OF ALL THE FORMS.**

Because you will need to give the judge a truthful and detailed description of what happened to you, the first form (Application for Sexual Assault Protective Order) may be especially upsetting. For additional counseling and support, the authors encourage anyone using this packet to contact their local Rape Crisis Center, local Women's Shelter, or the Women's Advocacy Project at 1-888-296-SAFE (1-888-296-7233) for help and support. Or, call the Rape, Abuse, and Incest National Network ("RAINN") hotline at 1-800-656-HOPE (1-800-656-4673), which can put victims in touch with local resources. The RAINN and Women's Advocacy Project hotlines also have Spanish-speaking operators. For the RAINN hotline, dial '4' to obtain help in Spanish.

Las líneas de Asistencia de la Red Nacional para Casos de Violación, Abuso e Incesto ("RAINN"), y del Proyecto de Abogacía Para Mujeres ("Women's Advocacy Project") también tienen operadoras que hablan español. Para obtener asistencia en español en la línea de RAINN, marque el '4'.

Write down what happened to you on scratch paper first, so that your final account of the violence is as clear and accurate as possible in the final forms that will be presented to the court.

PROTECTIVE ORDERS

What is a protective order?

It is a court order that protects you from someone who has sexually assaulted you, and may hurt you again.

How can a protective order help me?

It can order the other person to:
 Not threaten or harass you or your family
 Not contact you or go near you, your children, other family relatives, your home, where you work, or your children's schools
 Not have a gun or license to carry a gun
 The police can arrest the other person for violating any of these orders.

Can I get a protective order?

You can get a protective order if:

- (1) You are the victim of a sexual assault under Texas law, and
- (2) You are afraid that the other person may hurt you again. For example, you are afraid because the person said, "If you tell anyone about this, I'll hurt you," or they have called or emailed you in a way that scares you. NOTE: You can get a protective order even if you did not call the police or press charges against the other person.

What is sexual assault?

Under Texas law, it is sexual assault if anyone, male or female, made you have sex by using force or threatening to hurt you or someone close to you.

Specifically, this can mean:

- Someone put their penis, finger or other object in your vagina, anus or penis, by using force or threat of harm;
 - Someone put their penis in your mouth by using force or threat of harm;
 - Someone put your penis or vagina in contact with the mouth, anus, penis or vagina of any other person, by using force or threat of harm.
- It is also sexual assault if anyone ever made you do any of these things while you were unconscious, drunk or otherwise incapacitated.

General Instructions to Pro Se Sexual Assault Protective Order Packet (8/05)

How much does a protective order cost?

If you apply for it yourself, or through the prosecutor, it is free to you.

How do I ask for a protective order?

Fill out the forms in this kit:

- Application for Protective Order
- Respondent Information
- Temporary Ex Parte Protective Order and Show Cause Order
- Order Extending Temporary Ex Parte Sexual Assault Protective Order (if necessary)
- Protective Order

Who can ask for a protective order?

The prosecutor, or the victim with or without a lawyer, can file for a protective order. A victim has a constitutional right to ask for a protective order without a lawyer. A minor (a person younger than 18) needs a person over 18 (like a parent, school counselor or family friend) to ask for the protective order for them.

Where do I file the forms?

After you fill out the forms, take the forms with 2 copies to the courthouse. File them in the county where you or the other person lives. If you do not want the other person to know where you live, file them where the other person lives and do not put your address on the application or order.

Can I get protection right away?

The judge may give you a temporary order that protects you until your court hearing. This order is called a "Temporary Ex Parte Protective Order." Be ready to testify at a hearing when you file your Application.

Do I have to go to court?

Yes. Even if you get a Temporary Ex Parte Protective Order, you must go to the next hearing. It should be in about 2 weeks. The judge will decide if you should have protection and for how long, up to 2 years. If you do not

*Women's Advocacy Project
 In Texas, 1-888-296-SAFE
 In Austin, 512-225-9290*

go, the Temporary Ex Parte Protective Order will run out.

Will I have to see the other person in court?

Yes. The law requires that the other person gets notice of the Protective Order hearing, and the person has a right to be at the hearing and tell their version of what happened. They may show up with a lawyer, without a lawyer, or not show up at all.

Read the “Get Ready for Court” section (below). Or get it from the court clerk or from: www.women-law.org.

How will the other person know about the protective order?

You must have the other person “served” before the court hearing. This means someone – not you – will serve the other person a copy of your application for a protective order and notify them of the next hearing. The clerk can arrange for law enforcement to serve the other person the court papers for FREE (for you).

Need help?

In Tab 2, there are detailed guiding comments for filling out each form. You can use the guiding comments to help you fill out the blank forms, a copy of which are in Tab 3. If you need more help, call your local crisis center or contact the Sexual Assault Legal Line at 1-888-296-SAFE (7233). Or, go to www.women-law.org.

GET READY FOR COURT

Don't miss your hearing!

If you miss it, your Temporary Ex Parte Protective Order will run out and you will have to start from the beginning.

Get ready.

Fill out the Sexual Assault Protective Order before you go to court, and bring it with you.

Bring any evidence you have, like medical evidence, photographs of your injuries, or torn clothing. Also bring witnesses who know about the assault, like a neighbor, relative or police. The judge may ask them to testify.

If the Proof of Service (showing that the other person got notice of the hearing) was returned to you, file it with the clerk and bring a copy to court.

Get there 30 minutes early.

Find the courtroom.

Go in and tell the clerk or officer that you are present.

Watch the other cases so you will know what to do.

When your name is called, go to the front of the courtroom.

What if I don't speak English?

When you file your papers, tell the clerk that you will need an interpreter.

If a court interpreter is not available, bring someone to interpret for you. Do not ask a child, a protected person, or a witness to interpret for you.

What if I am deaf?

When you file your papers, ask for an interpreter or other accommodation.

What if I am afraid?

If you don't feel safe or want someone to go with you to the hearing, call your local rape crisis center or women's shelter, or call the

Rape, Abuse, and Incest National Network (RAINN) hotline at 1-800-656-HOPE (4673), which can put you in touch with local help.

Practice what you want to say.

Make a list of the orders you want and practice saying them. Do your best to be calm and stick to the facts. It is normal to get a little nervous. If you get nervous at the hearing, just read from your list. Use that list to see if the judge has made every order you asked for.

The judge may ask questions.

When you talk to the judge, always call him or her "Your Honor."

The other person or his lawyer may also ask you questions. Tell the truth. Speak slowly. Give complete answers. Be as calm as possible. Do not swear or yell.

If you don't understand, say, "I don't understand the question."

Speak only to the judge unless it is your turn to ask questions. When people are talking to the judge, wait for them to finish. Then you can ask questions about what they said.

What happens after the hearing?

If the judge agrees that you need protection, the judge will sign your Protective Order.

Take your signed order to the court clerk. Ask for copies of your order (or make extra copies), and keep one with you at all times.

Give copies of your order to your employer, school, landlord, etc. If the other person violates the order, call the police and show them your order. They can arrest the other person for violating the order.

Need help?

If you are in danger, call the police: 911

For counseling and to find resources in your area, call the RAINN hotline at 1-800-656-HOPE (4673)

For legal help, call the Women's Advocacy Project's Sexual Assault Legal Line at 1-888-296-SAFE (7233)



WOMEN'S ADVOCACY PROJECT

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**FORMS WITH GUIDING
COMMENTS**

Cause No. _____

Applicant _____

v.

Respondent _____

§ IN THE _____ COURT

§

§ OF

§ _____ COUNTY, TEXAS

§

Comment: Clerk will fill out this part and the boxes for "court" and "county" on the right below

Comment: Your name here – you are the Applicant

Comment: Name of the person you want protection from – this is the Respondent

APPLICATION FOR SEXUAL ASSAULT PROTECTIVE ORDER

TO THE HONORABLE JUDGE OF SAID COURT:

I. PROTECTED PERSONS

This Application for a Sexual Assault Protective Order is brought by _____, acting:

individually;

on behalf of the following persons:

_____, whose relationship(s) to Applicant is as follows:

Comment: Your name here – check the 1st box below if you are asking for the Order for yourself, and the 2nd box if you are asking for the Order for someone else, like a child, and fill their name in and their relationship to you (i.e. daughter).

Applicant resides in: _____ County, Texas **OR**

Respondent resides in: _____ County, Texas.

Comment: The county you live in, or, if you are filing in the county the Respondent lives in, fill in the second line with that county name.

II. RESTRICTED PERSONS

Respondent's name is: _____.

Respondent's address of residence is: _____

_____, _____ County, Texas.

Respondent's address of employment is: _____

_____, _____ County, Texas.

Comment: The Respondent means the other person who sexually assaulted you. Write the Respondent's first and last name here.

Comment: Write down Respondent's address, including his county.

Comment: Write down Respondent's work address, including county

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

Respondent's telephone number is: _____ (home),
_____ (work), and _____ (mobile).

Comment: Write down any phone numbers you have for Respondent

Respondent's attorney's name is _____, and
his/her address is _____,
_____ County, Texas.

Comment: If you know that Respondent has an attorney, fill in their name and address here, including county.

Respondent should be served with notice at (check one or more):

home during the following hours: _____

Comment: If you know Respondent is home during certain hours, fill in here

work during the following hours: _____

Comment: If you know Respondent is always at work certain hours, fill in here

other _____ during the following hours: _____

Comment: If you know Respondent is at any location routinely, fill in the place and hours here

III. RELATIONSHIP

Applicant is the victim of an offense under Section 22.001 or 22.021 of the Penal Code or is a prosecuting attorney acting on behalf of the victim.

(A) SEXUAL ASSAULT

As grounds for this Application for Sexual Assault Protective Order, Applicant would show that Respondent has engaged in the following act(s) constituting sexual assault:

Date(s) of incident(s): _____

Comment: If you know the exact date the incident occurred, put it here. If you are unsure of the exact date, use a more general time frame (i.e. mid-July 2003, Summer 2004)

Place(s) of incident(s): _____

Comment: Be as specific as you can, but do not guess. List an address, a city, a neighborhood, or whatever you can. If you do not know, write "unknown."

Description of incident(s):

Comment: Describe what happened when the other person who sexually assaulted you by using force or threats. If you do not remember all of the incident, write down as much as you can about it and the events leading up to it.

EXAMPLE ONLY – NOT FOR FILING

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Did you undergo any other medical treatment? YES NO

Comment: Circle yes if you received any medical care (i.e. seeing your own gynecologist) after the assault.

If yes, describe the medical treatment (e.g. date, medical personnel, etc.):

Were there any witnesses to the incident(s)? YES NO

Comment: Circle yes if anyone heard or saw ANY part of the assault – before, during, or after, including people you contacted immediately afterward for help..

If yes, list witness name(s) and contact information:

(B) THREAT OF FUTURE HARM

As grounds for this Application for Sexual Assault Protective Order, Applicant would show that Respondent has caused Applicant to be the subject of a threat that reasonably places the Applicant in fear of further harm from the Respondent.

Date(s) of threat(s): _____

Comment: List the date of any threat Respondent has made. Threats include phone calls, e-mails, driving by your home at odd hours, threatening your family or friends, or having other people do any of these things. If you do not know the exact date, give a time frame.

Place of threat(s): _____

Comment: Be as specific as possible – if you do not know the address, use a neighborhood or city. Do not guess.

Description of threat(s) or specific details of the sexual assault(s) that represent a threat: _____

Comment: Be as specific as possible. Include any behavior leading up to the incident or after the incident that makes you afraid that the Respondent may harm you again.

EXAMPLE ONLY – NOT FOR FILING

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IV. REQUEST FOR PROTECTION

Applicant requests the Court, after notice and hearing, to issue a Sexual Assault Protective Order ordering the Respondent to take the following action as specified by the court necessary or appropriate to prevent or reduce the likelihood of future harm to the applicant or a member of Applicant’s family or household: _____

Comment: Check this box if you want the court to order the Respondent to stop doing something that is not listed below, and explain what it is. Example – stopping Respondent from taking the same bus as you during a certain period of time, or participating in any activity that you routinely do.

Applicant requests the Court, after notice and hearing, to issue a Sexual Assault Protective Order prohibiting Respondent from:

Communicating directly or indirectly with the Applicant or any member of the Applicant's family or household in a threatening or harassing manner

Comment: Check this box if you want the Respondent to stop communicating with you in a threatening manner.

Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household

Comment: Check this box if you want the Respondent to stay away from any of the listed places.

Going within 200 yards of the following persons: _____

Comment: Check this box if you want the Respondent to stay away from you or any other family members at all times. Fill in the names of the people you want protected.

Going within 200 yards of the following persons’ locations:
_____'s Day Care(s)
_____, County, Texas
_____'s School(s):
_____, County, Texas
_____'s Place(s) of Employment or Business:
_____, County, Texas
_____'s Residence(s):
_____, County, Texas

Comment: Check this box if you want the Respondent to stay away from certain locations and list those locations. Generally, if an applicant checks the previous box, they check this one. Most applicants check both boxes.

EXAMPLE ONLY – NOT FOR FILING

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Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person

Comment: Check this box if you do not want the Respondent harassing or stalking you or whomever you are applying for the Order to protect.

Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

Comment: Check this box if you do not want the Respondent to possess a firearm.

V. REQUEST FOR CONFIDENTIALITY OF CERTAIN INFORMATION

Applicant requests the court to order that the following information be excluded from the Protective Order:

_____'s address (except if disclosed as county of residence for jurisdictional purposes);

Comment: Check this box and fill in your name if you do NOT want your address included in the Sexual Assault Protective Order

_____'s telephone number(s);

Comment: Check this box and fill in your name if you do NOT want your telephone number included in the Order

the location of _____'s place of employment or business;

Comment: Check this box and fill in your name if you do NOT want the name or address of your place of employment included in the Order.

_____'s child care or school;

Comment: Check this box and fill in your child or children's names if you do NOT want their schools included in the Order.

Applicant requests that the court order the clerk to strike the confidential information from the public records of the court and if necessary make a confidential record of such information for the use only of the court.

Comment: If you checked any of the 4 previous boxes, you must check this one too.

EXAMPLE ONLY – NOT FOR FILING

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VI. IMMEDIATE ORDER SOUGHT

Applicant requests the Court to issue, without notice or hearing, a temporary Ex Parte Sexual Assault Protective Order prohibiting Respondent from: _____

- Communicating directly or indirectly with the applicant or any member of the applicant's family or household in a threatening or harassing manner;
- Going to or near the residence, place of employment or business, or child-care facility or school of the applicant or any member of the applicant's family or household;
- Engaging in conduct directed specifically toward the applicant or any member of the applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person;
- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

Comment: This portion requests the court to include in any temporary order the same provision that you will be requesting in your final order. Check the box next to each conduct that you want the Respondent stopped from doing. **Make sure what you choose here matches what you choose in your Temporary Ex Parte Sexual Assault Protective Order and your final Sexual Assault Protective Order!**

VII. PRAYER

Applicant prays that citation and notice issue as required by law and that the Court enter the Protective Order(s) requested above. Applicant further prays that the Court immediately issue any Temporary Ex Parte Protective Order(s) requested above, in conformity with the allegations herein, prohibiting Respondent from the acts set forth above until a hearing can be held.

Applicant prays that a hearing be held no later than the time prescribed by law, and that upon notice and hearing the Court grant the relief requested; that the Court

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dispense with the necessity of a bond, and grant such other relief to which Applicant may be justly entitled.

Applicant also prays for general relief.

Respectfully Submitted,

Applicant

Comment: Your signature goes here.

VIII. VERIFICATION

(Required if Temporary Ex Parte Sexual Assault Protective Order is requested)

STATE OF TEXAS

COUNTY OF _____

Before me, the undersigned authority, on this ____ day of _____, 200__, personally appeared _____, the Applicant in the above Application for Sexual Assault Protective Order. After being duly sworn, she stated upon her oath that she is over 18 and otherwise qualified to make this oath, that she has read the foregoing Application for Sexual Assault Protective Order, that she has personal knowledge of the facts stated in the Application, and the facts and circumstances stated in the Application are true to the best of her knowledge and belief.

Comment: If you want to ask for a Temporary Ex Parte Protective Order, you will need to take your application to a notary. You can find notaries in courthouses, mail centers and banks, in addition to other places.

Signed this ____ day of _____, 20____.

Applicant

Comment: This line is for your signature, but DO NOT SIGN UNTIL YOU ARE IN FRONT OF A NOTARY PUBLIC.

Subscribed and sworn to before me on the ____ day of _____, 20____.

Notary Public in and for the
State of Texas
My Commission Expires:_____

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RESPONDENT INFORMATION

Please provide the following information regarding the Respondent so that the Respondent may be served with the court papers in your case. Items in ALL UPPERCASE LETTERS must be answered so that your protective order may be entered into the state database used by law enforcement for protective orders.

NAME OF RESPONDENT: _____

Alias (Nickname): _____

SEX M or F | DOB ____/____/____ | DL # _____

HEIGHT ____ ft ____ in | Place of Birth _____ | Other ID# _____

WEIGHT ____ lbs | SS # _____ | State ____ Expiration _____

RACE | EYE COLOR | HAIR COLOR | Skin

American Indian/Alaskan Native (I) | Black (BLK) | Black (BLK) | Albino (ALB)

Asian/Pacific Islander (A) | Blue (BLU) | Blond or Strawberry (BLN) | Black (BLK)

Black (B) | Brown (BRO) | Brown (BRO) | Dark (DRK)

White (W) | Gray (GRY) | Gray or partially gray (GRY) | Dark Brown (DBR)

Unknown (all other non-whites) (U) | Green (GRN) | Red or Auburn (RED) | Fair (FAR)

Other details: _____ | Hazel (HAZ) | White (WHI) | Light (LGT)

Ethnicity | Maroon (MAR) | Sandy (SDY) | Light Brown (LBR)

Hispanic (H) | Pink (PNK) | Medium (MED)

Non-Hispanic (N) | Multicolored (MUL) | Medium Brown (MBR)

Unknown (U) | Unknown (XXX) | Olive (OLV)

Other details: _____ | Bald (XXX) | Ruddy (RUD)

Other Identifying Information Check all that apply | Bald (XXX) | Sallow (SAL)

Unusual markings on body (please describe) | Style _____ | Yellow (YEL)

Glasses | Tattoos _____ | Length _____ | Unknown (XXX)

Beard | Scars _____ | Mental Problems _____ | Other details: _____

Moustache | Markings _____ | Drug/Alcohol Problems _____

Missing front teeth | Piercings _____ | Weapons _____

RESPONDENT'S RELATIONSHIP TO APPLICANT: _____

LOCATION

Residence: COUNTY: _____ Business: _____

Street: _____ Street: _____

City: _____ State: _____ Zip: _____ Phone: _____ Hours: _____

Dept: _____ Supervisor: _____

Vehicle: VIN: _____ Color: _____ Attorney: _____

Year: _____ Make: _____ Model: _____ Phone: _____

License Plate # _____ State: _____ Exp. _____ Address: _____

Other Contact Information (List name, address, phone number, relationship, and other helpful information)

Name: _____ Phone: _____

Address: _____ Relationship: _____

Other Information: _____

Name: _____ Phone: _____

Address: _____ Relationship: _____

Other Information: _____

Comment: You must fill out the items in ALL UPPERCASE LETTERS so that the information can go in the statewide law enforcement database. The other items are optional, but fill them out if you know the information.

Comment: Write the Respondent's name.

Comment: Write any nickname or street name that the Respondent goes by.

Comment: Check the M box if the Respondent is male, F if female. Fill in their height and weight. It is OK to estimate. Put the place where Respondent was born, and their Social Security number, in the blanks if you know them.

Comment: DOB means Date of Birth. Write in the day, month and year the Respondent was born. Separate the numbers with slashes.

Comment: Check the box for the Respondent's race. Add details in the blank if needed.

Comment: Check the box for the Respondent's eye color. Add details in the blank if needed.

Comment: Check the box for the Respondent's hair color. Put details for style and length in the blanks.

Comment: Check the box for the Respondent's skin color.

Comment: Add any other details about the Respondent that could help law enforcement find the Respondent. Information about tattoos, missing teeth, scars, or weapons are especially useful.

Comment: Describe how you know the Respondent, if they are related to you, etc.

Comment: Write the county where Respondent lives, and their address if you know it.

Comment: Write everything you know about the Respondent's car. The license plate number is especially helpful.

Comment: If Respondent has a lawyer, write down their name and where to contact them.

Comment: If you know friends or family that the Respondent might visit or stay with, write their name and address here.

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

Cause No. _____

_____	§	IN THE _____ COURT
Applicant	§	
	§	
v.	§	OF
	§	
_____	§	_____ COUNTY, TEXAS
Respondent	§	

TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER AND SHOW CAUSE ORDER

On this day the Application of _____ for a Temporary Ex Parte Sexual Assault Protective Order was presented to the Court. The Court, having considered the pleadings, written and sworn proof, and testimony, finds that Applicant is entitled to the relief requested.

Comment: The same instructions on the Application for Sexual Assault Protective Order apply to much of this Order. This Order is temporary, and is designed to protect you until you can get a hearing on the full Order.

Comment: Your name

I. FINDINGS OF THE COURT

The granting of this ORDER is based upon the following findings of the Court:

1. That there is a clear and present danger that a sexual assault or other harm will be committed by Respondent before a full hearing can be held regarding Applicant’s request for a Protective Order.
2. That Applicant and/or other members of the Applicant’s family or household who are affected by this suit will suffer immediate and irreparable injury, loss, or damage for which there is no adequate remedy at law unless Respondent is immediately prohibited from the acts set forth below.

II. RESTRICTED PERSONS

IT IS ORDERED that the Clerk of this Court issue a TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER immediately prohibiting Respondent, _____ from:

Comment: Respondent’s name (the name of the other person who sexually assaulted you)

- Communicating directly or indirectly with the Applicant or any member of the Applicant’s family or household in a threatening or harassing manner

Comment: The following set of 6 check boxes should match what you filled out in the Application for Sexual Assault Protective Order exactly. Refer to that form and make sure they match.

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women’s Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

- Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household
- Going within 200 yards of the following persons: _____

- Going within 200 yards of the following persons' locations:
 _____'s Day Care(s):
 _____, County, Texas
 _____'s School(s):
 _____, County, Texas
 _____'s Place(s) of Employment or Business:
 _____, County, Texas
 _____'s Residence(s):
 _____, County, Texas
- Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person
- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

III. EXPIRATION DATE

These TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDERS shall be effective immediately and are binding on the Respondent and shall continue in full force and effect until the _____ day after the date that the order is signed by the Judge or further order of the Court.

Comment: Leave this blank – the Judge fills this in.

IV. HEARING

IT IS FURTHER ORDERED that the Clerk shall issue notice ordering Respondent to appear, and Respondent is hereby ordered to appear, before this court in the _____ County Courthouse at _____, Texas on the _____ day of _____, 20____, at _____ o'clock ____m. to show cause why during the pendency of this case:

Comment: The county name in which you are filing this Application

Comment: The address of the courthouse of the county in which you are filing this Application.

Comment: The judge or judge's assistant will fill these blanks in with the information about when your final hearing is set. BE SURE THIS AREA GETS FILLED OUT BEFORE YOU LEAVE THE COURTHOUSE!!!

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

The TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER granted herein should not be made into a final Protective Order; and

Any further orders deemed necessary and equitable should not be entered by the Court.

WARNING

A PERSON WHO VIOLATES THIS ORDER MAY BE PUNISHED FOR CONTEMPT OF COURT BY A FINE OF AS MUCH AS \$500 OR BY CONFINEMENT IN JAIL FOR AS LONG AS SIX MONTHS, OR BOTH. NO PERSON, INCLUDING A PERSON WHO IS PROTECTED BY THIS ORDER, MAY GIVE PERMISSION TO ANYONE TO IGNORE OR VIOLATE ANY PROVISION OF THIS ORDER. DURING THE TIME IN WHICH THIS ORDER IS VALID, EVERY PROVISION OF THIS ORDER IS IN FULL FORCE AND EFFECT UNLESS A COURT CHANGES THE ORDER. IT IS UNLAWFUL FOR ANY PERSON, OTHER THAN A PEACE OFFICER, AS DEFINED BY SECTION 1.07, PENAL CODE, ACTIVELY ENGAGED IN EMPLOYMENT AS A SWORN, FULL-TIME PAID EMPLOYEE OF A STATE AGENCY OR POLITICAL SUBDIVISION, WHO IS SUBJECT TO A PROTECTIVE ORDER TO POSSESS A FIREARM OR AMMUNITION.

Comment: The judge will fill in these blanks and sign below. Be sure they get filled out before you leave the courthouse.

Signed this ____ day of _____, 20____, at ____ o'clock __.m. |

JUDGE PRESIDING

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

Cause No. _____

Applicant

v.

Respondent

§ IN THE _____ COURT
§
§
§ OF
§
§ _____ COUNTY, TEXAS
§

ORDER EXTENDING TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER

On this _____ day of _____, 200____, came to be heard Applicant’s Request for Extension of the Temporary Ex Parte Sexual Assault Protective Order prohibiting Respondent, _____, from the acts set forth in the Temporary Ex Parte Sexual Assault Protective Order and Show Cause Order previously entered in this case, and the Court finds that said Temporary Ex Parte Sexual Assault Protective Order should be extended.

Comment: THIS FORM IS ONLY NEEDED IF YOU ALREADY HAVE A TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER IN PLACE AND NEED IT EXTENDED. THIS MOST OFTEN HAPPENS WHEN THE FINAL HEARING HAS BEEN RESCHEDULED BECAUSE THE RESPONDENT HAS NOT BEEN SERVED WITH NOTICE OF THE HEARING.
Again, the information in this first section is identical to the previous forms.

Comment: Write the date of your hearing to extend the temporary order here

Comment: Respondent’s name (the person who sexually assaulted you)

I. FINDINGS

The granting of this ORDER is based upon the following findings of the Court:

1. That there is a clear and present danger that a sexual assault or other harm will be committed by Respondent before a full hearing can be held regarding Applicant’s request for a Protective Order.
2. That Applicant and/or other members of the Applicant’s family or household who are affected by this suit will suffer immediate and irreparable injury, loss, or damage for which there is no adequate remedy at law unless Respondent is immediately prohibited from the acts set forth below.

II. RESTRICTED PERSONS

IT IS ORDERED that the Clerk of this Court issue a TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER immediately prohibiting Respondent, _____ from:

Comment: Respondent’s name

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women’s Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

- Communicating directly or indirectly with the Applicant or any member of the Applicant's family or household in a threatening or harassing manner
- Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household
- Going within 200 yards of the following persons: _____

- Going within 200 yards of the following persons' locations:
 _____'s Day Care(s):
 _____, County, Texas
 _____'s School(s):
 _____, County, Texas
 _____'s Place(s) of Employment or Business:
 _____, County, Texas
 _____'s Residence(s):
 _____, County, Texas
- Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person
- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

Comment: Look at your Original Ex Parte Temporary Order and fill out the EXACT SAME information for the following 6 boxes.

III. EXPIRATION DATE

These TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDERS shall be effective immediately and are binding on the Respondent and shall continue in full force and effect until the _____ day after the date that the order is signed by the Judge or further order of the Court.

Comment: The judge will fill in this line – leave it blank for now.

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

IV. HEARING

IT IS FURTHER ORDERED that the Clerk shall issue notice ordering Respondent to appear, and Respondent is hereby ordered to appear, before this court in the _____ County Courthouse at _____, Texas on the _____ day of _____, 20____, at _____ o'clock __.m. to show cause why during the pendency of this case:

Comment: Fill in the county in which you are filing.

Comment: Write the address of the courthouse of the county in which you are filing.

Comment: The judge or the judge's clerk will fill out this part with the information about when your final hearing will be. BE SURE THIS SECTION IS FILLED OUT BEFORE YOU LEAVE THE COURTHOUSE.

The TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER granted herein should not be made into a final Protective Order; and

Any further orders deemed necessary and equitable should not be entered by the Court.

WARNING

A PERSON WHO VIOLATES THIS ORDER MAY BE PUNISHED FOR CONTEMPT OF COURT BY A FINE OF AS MUCH AS \$500 OR BY CONFINEMENT IN JAIL FOR AS LONG AS SIX MONTHS, OR BOTH. NO PERSON, INCLUDING A PERSON WHO IS PROTECTED BY THIS ORDER, MAY GIVE PERMISSION TO ANYONE TO IGNORE OR VIOLATE ANY PROVISION OF THIS ORDER. DURING THE TIME IN WHICH THIS ORDER IS VALID, EVERY PROVISION OF THIS ORDER IS IN FULL FORCE AND EFFECT UNLESS A COURT CHANGES THE ORDER. IT IS UNLAWFUL FOR ANY PERSON, OTHER THAN A PEACE OFFICER, AS DEFINED BY SECTION 1.07, PENAL CODE, ACTIVELY ENGAGED IN EMPLOYMENT AS A SWORN, FULL-TIME PAID EMPLOYEE OF A STATE AGENCY OR POLITICAL SUBDIVISION, WHO IS SUBJECT TO A PROTECTIVE ORDER TO POSSESS A FIREARM OR AMMUNITION.

Signed this _____ day of _____, 20____, at _____ o'clock __.m.

Comment: Leave this blank, as well as the signature line below. The judge will fill these out.

JUDGE PRESIDING

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

Cause No. _____

Applicant

v.

Respondent

§
§
§
§
§
§

IN THE _____ COURT

OF

_____ COUNTY, TEXAS

SEXUAL ASSAULT PROTECTIVE ORDER

On the _____ day of _____, 200____, the Court heard the Application of _____ for a Sexual Assault Protective Order.

Comment: This is actual order for your Protective Order, good for up to two years. The information here is identical to the information in the previous forms. Most of the information on this form will be identical to what you filled out in your Application for Sexual Assault Protective order, so it will be useful to keep the Application handy as you fill out this form.

Comment: Your name

Comment: Fill in the date of your hearing here.

PROTECTED PERSONS

Applicant, _____ appeared in person and announced ready.

Comment: Your name here.

RESTRICTED PERSONS

Respondent, _____:

Comment: Respondent's name (the person who sexually assaulted you)

Although duly cited, did not appear and wholly made default;

Comment: DO NOT CHOOSE ONE OF THESE BOXES UNTIL YOU ARE AT THE HEARING – if Respondent does not show up, check this box

Appeared in person and announced ready;

Comment: If Respondent shows up by himself, check this box

Appeared in person and by attorney and announced ready.

Comment: If Respondent shows up with an attorney, check this box

JURISDICTION

The Court, having considered the pleadings and having heard the evidence and arguments, finds that all necessary prerequisites of the law have been legally satisfied and that this Court has jurisdiction over the parties and subject matter of this cause.

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

RECORD

The making of a record of testimony was:

- waived by the parties with the consent of the Court; or
- duly taken by the court reporter for this Court.

Comment: DO NOT CHOOSE ONE OF THESE BOXES UNTIL YOU ARE AT THE HEARING – you have the option to have a court reporter write down everything that is said for free. It is usually a good idea to have a record made. However, if you and the judge and the Respondent agree that a court reporter will not write down everything said, check this box. If you decide to have a record made, tell the judge and check the box below.

FINDINGS

- The Court finds that the parties have agreed to this Protective Order.
- The Court finds that a sexual assault has occurred and that the Applicant is the subject of a threat that reasonably places her/him in fear of further harm from Respondent. The Court further finds that the following orders are necessary for the safety, welfare, and protection of the Applicant and other members of the family or household who are affected by this suit.

Comment: DO NOT CHOOSE ONE OF THESE BOXES UNTIL YOU ARE AT THE HEARING – if the Respondent agrees to the Protective Order, check this first box. If the judge held a hearing because you and the Respondent did not agree, check the next box.

IT IS ORDERED that Respondent is prohibited from:

- Communicating directly or indirectly with the Applicant or any member of the Applicant's family or household in a threatening or harassing manner,
- Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household,
- Going within 200 yards of the following persons:

- Going within 200 yards of the following persons' locations:
_____’s Day Care(s):
_____, County, Texas

Comment: Look at your Application for Sexual Assault Protective Order (the first form you filled out) and check exactly the same boxes and fill out the same information in this section. **THIS SECTION MUST BE EXACTLY THE SAME AS YOUR APPLICATION FOR SEXUAL ASSAULT PROTECTIVE ORDER!!!**

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women’s Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

_____’s School(s):
 _____, County, Texas
 _____’s Place(s) of Employment or Business:
 _____, County, Texas
 _____’s Residence(s):
 _____, County, Texas

- Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person,
- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.
- IT IS ORDERED that Respondent to take the following action as specified by the court necessary or appropriate to prevent or reduce the likelihood of future harm to the applicant or a member of Applicant’s family or household: _____

SERVICE

This Order:

- was served on Respondent in open court;
- shall be personally served upon Respondent in the same manner as a writ

of injunction.

Comment: DO NOT CHOOSE ONE OF THESE BOXES UNTIL YOU ARE AT THE HEARING – check the 1st box if Respondent comes to the hearing.

Comment: Check this box if Respondent does not come to the hearing.

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women’s Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

THE CLERK IS ORDERED to send a copy of this order to the Chief of Police of
the City of _____, _____, County, Texas.

Comment: The name of your city and county

THE CLERK IS ALSO ORDERED to send a copy to the child care

Comment: Check this box if you requested that the Respondent stay away from your child or children's school or daycare. Make sure you give the clerk of the court the name of any place you need the Order sent to.

facility or school.

WARNING

A PERSON WHO VIOLATES THIS ORDER MAY BE PUNISHED FOR CONTEMPT OF COURT BY A FINE OF AS MUCH AS \$500 OR BY CONFINEMENT IN JAIL FOR AS LONG AS SIX MONTHS, OR BOTH.

NO PERSON, INCLUDING A PERSON WHO IS PROTECTED BY THIS ORDER, MAY GIVE PERMISSION TO ANYONE TO IGNORE OR VIOLATE ANY PROVISION OF THIS ORDER. DURING THE TIME IN WHICH THIS ORDER IS VALID, EVERY PROVISION OF THIS ORDER IS IN FULL FORCE AND EFFECT UNLESS A COURT CHANGES THE ORDER.

IT IS UNLAWFUL FOR ANY PERSON, OTHER THAN A PEACE OFFICER, AS DEFINED BY SECTION 1.07, PENAL CODE, ACTIVELY ENGAGED IN EMPLOYMENT AS A SWORN, FULL-TIME PAID EMPLOYEE OF A STATE AGENCY OR POLITICAL SUBDIVISION, WHO IS SUBJECT TO A PROTECTIVE ORDER TO POSSESS A FIREARM OR AMMUNITION.

A VIOLATION OF THIS ORDER BY COMMISSION OF AN ACT PROHIBITED BY THE ORDER MAY BE PUNISHABLE BY A FINE OF AS MUCH AS \$4,000 OR BY CONFINEMENT IN JAIL FOR AS LONG AS ONE YEAR, OR BOTH. AN ACT

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women's Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*

THAT RESULTS IN A SEPARATE OFFENSE MAY BE PROSECUTED AS A SEPARATE OFFENSE IN ADDITION TO A VIOLATION OF THIS ORDER.

EXPIRATION DATE

This Sexual Assault Protective Order shall continue in full force and effect until the ____ day of _____, 20____.

Comment: Leave this blank. The judge will fill this in with the date the Order ends. MAKE SURE THE JUDGE FILLS THIS PART OUT BEFORE YOU LEAVE THE COURTHOUSE!!!

Signed this ____ day of _____, 20____, at ____ o'clock __.m.

JUDGE PRESIDING

Comment: Leave this blank – the judge signs his/her name here.

RECEIPT ACKNOWLEDGED

I hereby acknowledge that I have received a copy of this Sexual Assault Protective Order.

Respondent.

Comment: Respondent will sign here to show they received the Order

AGREED ORDER Approved as to form and content:

Comment: This section is only filled out if you and the Respondent agree on the Protective Order. If you do, then both of you sign your names.

Respondent

Applicant

EXAMPLE ONLY – NOT FOR FILING

For help, call the Women’s Advocacy Project Sexual Assault Legal Line at 1-888-296-SAFE (7233). They also have examples with instructions in Spanish. *También tienen ejemplares que contienen instrucciones en español.*



WOMEN'S ADVOCACY PROJECT

**PRO SE
SEXUAL ASSAULT
PROTECTIVE ORDER PACKET**

BLANK FORMS

Cause No. _____

_____	§	IN THE _____ COURT
Applicant	§	
	§	
v.	§	OF
	§	
_____	§	_____ COUNTY, TEXAS
Respondent	§	

APPLICATION FOR SEXUAL ASSAULT PROTECTIVE ORDER

TO THE HONORABLE JUDGE OF SAID COURT:

I. PROTECTED PERSONS

This Application for a Sexual Assault Protective Order is brought by _____, acting:

individually;

on behalf of the following persons:

_____, whose relationship(s) to Applicant is as follows:

Applicant resides in: _____ County, Texas **OR**

Respondent resides in: _____ County, Texas.

II. RESTRICTED PERSONS

Respondent's name is: _____.

Respondent's address of residence is: _____

_____, _____ County, Texas.

Respondent's address of employment is: _____

_____, _____ County, Texas.

Respondent's telephone number is: _____ (home),

_____ (work), and _____ (mobile).

Respondent's attorney's name is _____, and
his/her address is _____,
_____ County, Texas.

Respondent should be served with notice at (check one or more):

- home during the following
hours: _____
- work during the following
hours: _____
- other _____ during the
following hours: _____

III. RELATIONSHIP

Applicant is the victim of an offense under Section 22.001 or 22.021 of the Penal Code or is a prosecuting attorney acting on behalf of the victim.

(A) SEXUAL ASSAULT

As grounds for this Application for Sexual Assault Protective Order, Applicant would show that Respondent has engaged in the following act(s) constituting sexual assault:

Date(s) of incident(s): _____

Place(s) of incident(s): _____

Description of incident(s):

Did you report the incident(s) to the police? YES NO

If you did report the incident to the police, state all known information about the report (e.g. date, investigating officer, investigating agency):

Did you undergo a forensic medical exam (e.g. a SANE exam)? YES NO

If yes, describe the forensic medical exam (e.g. date, medical personnel, report identification information, etc.):

Did you undergo any other medical treatment? YES NO

If yes, describe the medical treatment (e.g. date, medical personnel, etc.):

Were there any witnesses to the incident(s)? YES NO

If yes, list witness name(s) and contact information:

Did you report the threat(s) to the police? YES NO

If yes, list all known information about the report (e.g. date, investigating officer, investigating agency): _____

Were there any witnesses to the threat(s)? YES NO

If yes, list witness name(s) and contact information:

Based on the Conduct of Respondent as alleged above, Applicant reasonably believes that she is (1) the victim of a sexual assault; and (2) the subject of a threat that reasonably places her/him in fear of further harm from the Respondent.

IV. REQUEST FOR PROTECTION

 Applicant requests the Court, after notice and hearing, to issue a Sexual Assault Protective Order ordering the Respondent to take the following action as specified by the court necessary or appropriate to prevent or reduce the likelihood of future harm to the applicant or a member of Applicant’s family or household: _____

 Applicant requests the Court, after notice and hearing, to issue a Sexual Assault Protective Order prohibiting Respondent from:

 Communicating directly or indirectly with the Applicant or any member of the Applicant's family or household in a threatening or harassing manner

 Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household

Going within 200 yards of the following persons: _____

Going within 200 yards of the following persons' locations:
_____'s Day Care(s)
_____, County, Texas
_____'s School(s):
_____, County, Texas
_____'s Place(s) of Employment or Business:
_____, County, Texas
_____'s Residence(s):
_____, County, Texas

Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person

Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

V. REQUEST FOR CONFIDENTIALITY OF CERTAIN INFORMATION

Applicant requests the court to order that the following information be excluded from the Protective Order:

_____'s address (except if disclosed as county of residence for jurisdictional purposes);

_____'s telephone number(s);

- the location of _____'s place of employment or business;
- _____'s child care or school;
- Applicant requests that the court order the clerk to strike the confidential information from the public records of the court and if necessary make a confidential record of such information for the use only of the court.

VI. IMMEDIATE ORDER SOUGHT

Applicant requests the Court to issue, without notice or hearing, a Temporary Ex Parte Sexual Assault Protective Order prohibiting Respondent from:

- Communicating directly or indirectly with the applicant or any member of the applicant's family or household in a threatening or harassing manner;
- Going to or near the residence, place of employment or business, or child-care facility or school of the applicant or any member of the applicant's family or household;
- Engaging in conduct directed specifically toward the applicant or any member of the applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person;
- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

VII. PRAYER

Applicant prays that citation and notice issue as required by law and that the Court enter the Protective Order(s) requested above. Applicant further prays that the Court immediately issue any Temporary Ex Parte Protective Order(s) requested above, in conformity with the allegations herein, prohibiting Respondent from the acts set forth

above until a hearing can be held.

Applicant prays that a hearing be held no later than the time prescribed by law, and that upon notice and hearing the Court grant the relief requested; that the Court dispense with the necessity of a bond, and grant such other relief to which Applicant may be justly entitled.

Applicant also prays for general relief.

Respectfully Submitted,

Applicant

VIII. VERIFICATION

(Required if Temporary Ex Parte Sexual Assault Protective Order is requested)

STATE OF TEXAS

COUNTY OF _____

Before me, the undersigned authority, on this ____ day of _____, 200__, personally appeared _____, the Applicant in the above Application for Sexual Assault Protective Order. After being duly sworn, she stated upon her oath that she is over 18 and otherwise qualified to make this oath, that she has read the foregoing Application for Sexual Assault Protective Order, that she has personal knowledge of the facts stated in the Application, and the facts and circumstances stated in the Application are true to the best of her knowledge and belief.

Signed this _____ day of _____, 20_____.

Applicant

Subscribed and sworn to before me on the ____ day of _____, 20_____.

My commission expires:

Notary Public in and for the State of Texas

RESPONDENT INFORMATION

Please provide the following information regarding the Respondent so that the Respondent may be served with the court papers in your case. Items in **ALL UPPERCASE LETTERS** must be answered so that your protective order may be entered into the state database used by law enforcement for protective orders.

NAME OF RESPONDENT: _____

Alias (Nickname): _____

SEX M or F **DOB** ____/____/____ **DL #** _____

HEIGHT ____ ft ____ in Place of Birth _____ **Other ID#** _____

WEIGHT ____ lbs **SS #** _____ **State** ____ **Expiration** _____

<p>RACE</p> <p><input type="checkbox"/> American Indian/Alaskan Native (I)</p> <p><input type="checkbox"/> Asian/Pacific Islander (A)</p> <p><input type="checkbox"/> Black (B)</p> <p><input type="checkbox"/> White (W)</p> <p><input type="checkbox"/> Unknown (all other non-whites) (U)</p> <p>Other details: _____</p> <p>Ethnicity</p> <p><input type="checkbox"/> Hispanic (H)</p> <p><input type="checkbox"/> Non-Hispanic (N)</p> <p><input type="checkbox"/> Unknown (U)</p> <p>Other details: _____</p>	<p>EYE COLOR</p> <p><input type="checkbox"/> Black (BLK)</p> <p><input type="checkbox"/> Blue (BLU)</p> <p><input type="checkbox"/> Brown (BRO)</p> <p><input type="checkbox"/> Gray (GRY)</p> <p><input type="checkbox"/> Green (GRN)</p> <p><input type="checkbox"/> Hazel (HAZ)</p> <p><input type="checkbox"/> Maroon (MAR)</p> <p><input type="checkbox"/> Pink (PNK)</p> <p><input type="checkbox"/> Multicolored (MUL)</p> <p><input type="checkbox"/> Unknown (XXX)</p> <p>Other details: _____</p>	<p>HAIR COLOR</p> <p><input type="checkbox"/> Black (BLK)</p> <p><input type="checkbox"/> Blond or Strawberry (BLN)</p> <p><input type="checkbox"/> Brown (BRO)</p> <p><input type="checkbox"/> Gray or partially gray (GRY)</p> <p><input type="checkbox"/> Red or Auburn (RED)</p> <p><input type="checkbox"/> White (WHI)</p> <p><input type="checkbox"/> Sandy (SDY)</p> <p><input type="checkbox"/> Unknown or completely Bald (XXX)</p> <p><i>also indicate BALD on Scars/Tattoos/Markings</i></p> <p>Other details: _____</p> <p>Style _____</p> <p>Length _____</p>	<p>Skin</p> <p><input type="checkbox"/> Albino (ALB)</p> <p><input type="checkbox"/> Black (BLK)</p> <p><input type="checkbox"/> Dark (DRK)</p> <p><input type="checkbox"/> Dark Brown (DBR)</p> <p><input type="checkbox"/> Fair (FAR)</p> <p><input type="checkbox"/> Light (LGT)</p> <p><input type="checkbox"/> Light Brown (LBR)</p> <p><input type="checkbox"/> Medium (MED)</p> <p><input type="checkbox"/> Medium Brown (MBR)</p> <p><input type="checkbox"/> Olive (OLV)</p> <p><input type="checkbox"/> Ruddy (RUD)</p> <p><input type="checkbox"/> Sallow (SAL)</p> <p><input type="checkbox"/> Yellow (YEL)</p> <p><input type="checkbox"/> Unknown (XXX)</p> <p>Other details: _____</p>
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Other Identifying Information *Check all that apply*

Unusual markings on body *(please describe)*

<input type="checkbox"/> Glasses	<input type="checkbox"/> Tattoos _____	<input type="checkbox"/> Mental Problems _____
<input type="checkbox"/> Beard	<input type="checkbox"/> Scars _____	
<input type="checkbox"/> Moustache	<input type="checkbox"/> Markings _____	<input type="checkbox"/> Drug/Alcohol Problems
<input type="checkbox"/> Missing front teeth	<input type="checkbox"/> Piercings _____	<input type="checkbox"/> Weapons _____

RESPONDENT'S RELATIONSHIP TO APPLICANT _____

LOCATION

<p>Residence: COUNTY _____</p> <p>Street: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Vehicle: VIN _____ Color: _____</p> <p>Year: _____ Make: _____ Model: _____</p> <p>License Plate # _____ State: _____ Exp. _____</p>	<p>Business: _____</p> <p>Street: _____</p> <p>Phone: _____ Hours: _____</p> <p>Dept: _____ Supervisor: _____</p> <p>Attorney: _____</p> <p>Phone: _____</p> <p>Address: _____</p>
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Other Contact Information *(List name, address, phone number, relationship, and other helpful information)*

<p>Name: _____</p> <p>Address: _____</p> <p>Other Information: _____</p>	<p>Phone: _____</p> <p>Relationship: _____</p>
<p>Name: _____</p> <p>Address: _____</p> <p>Other Information: _____</p>	<p>Phone: _____</p> <p>Relationship: _____</p>

Cause No. _____

Applicant	§	IN THE _____ COURT
	§	
v.	§	OF
	§	
Respondent	§	_____ COUNTY, TEXAS
	§	

**TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER AND
SHOW CAUSE ORDER**

On this day the Application of _____ for a Temporary Ex Parte Sexual Assault Protective Order was presented to the Court. The Court, having considered the pleadings, written and sworn proof, and testimony, finds that Applicant is entitled to the relief requested.

I. FINDINGS OF THE COURT

The granting of this ORDER is based upon the following findings of the Court:

1. That there is a clear and present danger that a sexual assault or other harm will be committed by Respondent before a full hearing can be held regarding Applicant’s request for a Protective Order.
2. That Applicant and/or other members of the Applicant’s family or household who are affected by this suit will suffer immediate and irreparable injury, loss, or damage for which there is no adequate remedy at law unless Respondent is immediately prohibited from the acts set forth below.

II. RESTRICTED PERSONS

IT IS ORDERED that the Clerk of this Court issue a TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER immediately prohibiting Respondent, _____ from:

- Communicating directly or indirectly with the Applicant or any member of the Applicant's family or household in a threatening or harassing manner
- Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household

Going within 200 yards of the following persons: _____

Going within 200 yards of the following persons' locations:
_____ 's Day Care(s):
_____, County, Texas
_____ 's School(s):
_____, County, Texas
_____ 's Place(s) of Employment or Business:
_____, County, Texas
_____ 's Residence(s):
_____, County, Texas

- Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person
- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

III. EXPIRATION DATE

These TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDERS shall be effective immediately and are binding on the Respondent and shall continue in full force and effect until the _____ day after the date that the order is signed by the Judge or further order of the Court.

IV. HEARING

IT IS FURTHER ORDERED that the Clerk shall issue notice ordering Respondent to appear, and Respondent is hereby ordered to appear, before this court in the

_____ County Courthouse at _____

_____, Texas on the

_____ day of _____, 20_____, at _____ o'clock _____.m. to show

cause why during the pendency of this case:

The TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER granted herein should not be made into a final Protective Order; and

Any further orders deemed necessary and equitable should not be entered by the Court.

WARNING

A PERSON WHO VIOLATES THIS ORDER MAY BE PUNISHED FOR CONTEMPT OF COURT BY A FINE OF AS MUCH AS \$500 OR BY CONFINEMENT IN JAIL FOR AS LONG AS SIX MONTHS, OR BOTH. NO PERSON, INCLUDING A PERSON WHO IS PROTECTED BY THIS ORDER, MAY GIVE PERMISSION TO ANYONE TO IGNORE OR VIOLATE ANY PROVISION OF THIS ORDER.

DURING THE TIME IN WHICH THIS ORDER IS VALID, EVERY PROVISION OF THIS ORDER IS IN FULL FORCE AND EFFECT UNLESS A COURT CHANGES THE ORDER. IT IS UNLAWFUL FOR ANY PERSON, OTHER THAN A PEACE OFFICER, AS DEFINED BY SECTION 1.07, PENAL CODE, ACTIVELY ENGAGED IN EMPLOYMENT AS A SWORN, FULL-TIME PAID EMPLOYEE OF A STATE AGENCY OR POLITICAL SUBDIVISION, WHO IS SUBJECT TO A PROTECTIVE ORDER TO POSSESS A FIREARM OR AMMUNITION.

Signed this ____ day of _____, 20_____, at _____ o'clock __.m.

JUDGE PRESIDING

Cause No. _____

Applicant	§	IN THE _____ COURT
	§	
v.	§	OF
	§	
Respondent	§	_____ COUNTY, TEXAS
	§	

**ORDER EXTENDING TEMPORARY EX PARTE SEXUAL ASSAULT
PROTECTIVE ORDER**

On this ____ day of _____, 200____, came to be heard Applicant’s Request for Extension of the Temporary Ex Parte Sexual Assault Protective Order prohibiting Respondent, _____, from the acts set forth in the Temporary Ex Parte Sexual Assault Protective Order and Show Cause Order previously entered in this case, and the Court finds that said Temporary Ex Parte Sexual Assault Protective Order should be extended.

I. FINDINGS

The granting of this ORDER is based upon the following findings of the Court:

1. That there is a clear and present danger that a sexual assault or other harm will be committed by Respondent before a full hearing can be held regarding Applicant’s request for a Protective Order.
2. That Applicant and/or other members of the Applicant’s family or household who are affected by this suit will suffer immediate and irreparable injury, loss, or damage for which there is no adequate remedy at law unless Respondent is immediately prohibited from the acts set forth below.

II. RESTRICTED PERSONS

IT IS ORDERED that the Clerk of this Court issue a TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER immediately prohibiting Respondent, _____ from:

- Communicating directly or indirectly with the Applicant or any member of the Applicant's family or household in a threatening or harassing manner

- Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household

- Going within 200 yards of the following persons: _____

- Going within 200 yards of the following persons' locations:
 _____'s Day Care(s):
 _____, County, Texas
 _____'s School(s):
 _____, County, Texas
 _____'s Place(s) of Employment or Business:
 _____, County, Texas
 _____'s Residence(s):
 _____, County, Texas

- Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person

- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.

III. EXPIRATION DATE

These TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDERS shall be effective immediately and are binding on the Respondent and shall continue in full force and effect until the _____ day after the date that the order is signed by the Judge or further order of the Court.

IV. HEARING

IT IS FURTHER ORDERED that the Clerk shall issue notice ordering Respondent to appear, and Respondent is hereby ordered to appear, before this court in the _____ County Courthouse at _____, Texas on the _____ day of _____, 20____, at _____ o'clock __.m., to show cause why during the pendency of this case:

The TEMPORARY EX PARTE SEXUAL ASSAULT PROTECTIVE ORDER granted herein should not be made into a final Protective Order; and

Any further orders deemed necessary and equitable should not be entered by the Court.

WARNING

A PERSON WHO VIOLATES THIS ORDER MAY BE PUNISHED FOR CONTEMPT OF COURT BY A FINE OF AS MUCH AS \$500 OR BY CONFINEMENT IN JAIL FOR AS LONG AS SIX MONTHS, OR BOTH. NO PERSON, INCLUDING A PERSON WHO IS PROTECTED BY THIS ORDER, MAY GIVE PERMISSION TO ANYONE TO IGNORE OR VIOLATE ANY PROVISION OF THIS ORDER. DURING THE TIME IN WHICH THIS ORDER IS VALID, EVERY PROVISION OF THIS ORDER IS IN FULL FORCE AND EFFECT UNLESS A COURT CHANGES THE ORDER. IT IS UNLAWFUL FOR ANY PERSON, OTHER THAN A PEACE OFFICER, AS DEFINED BY SECTION 1.07, PENAL CODE, ACTIVELY ENGAGED IN EMPLOYMENT AS A SWORN, FULL-TIME PAID EMPLOYEE OF A STATE AGENCY OR POLITICAL SUBDIVISION, WHO IS SUBJECT TO A PROTECTIVE ORDER TO POSSESS A FIREARM OR AMMUNITION.

Signed this ____ day of _____, 20____, at _____ o'clock __.m.

JUDGE PRESIDING

Cause No. _____

_____	§	IN THE _____ COURT
Applicant	§	
	§	
v.	§	OF
	§	
_____	§	_____ COUNTY, TEXAS
Respondent	§	

SEXUAL ASSAULT PROTECTIVE ORDER

On the ____ day of _____, 200____, the Court heard the Application of _____ for a Sexual Assault Protective Order.

PROTECTED PERSONS

Applicant, _____ appeared in person and announced ready.

RESTRICTED PERSONS

Respondent, _____:

- Although duly cited, did not appear and wholly made default;
- Appeared in person and announced ready;
- Appeared in person and by attorney and announced ready.

JURISDICTION

The Court, having considered the pleadings and having heard the evidence and arguments, finds that all necessary prerequisites of the law have been legally satisfied and that this Court has jurisdiction over the parties and subject matter of this cause.

RECORD

The making of a record of testimony was:

- waived by the parties with the consent of the Court; or
- duly taken by the court reporter for this Court.

FINDINGS

- The Court finds that the parties have agreed to this Protective Order.
- The Court finds that a sexual assault has occurred and that the Applicant is the subject of a threat that reasonably places her/him in fear of further harm from Respondent. The Court further finds that the following orders are necessary for the safety, welfare, and protection of the Applicant and other members of the family or household who are affected by this suit.

IT IS ORDERED that Respondent is prohibited from:

- Communicating directly or indirectly with the Applicant or any member of the Applicant's family or household in a threatening or harassing manner,
- Going to or near the residence, place of employment or business, or child-care facility or school of the Applicant or any member of the Applicant's family or household,
- Going within 200 yards of the following persons:

- Going within 200 yards of the following persons' locations:
 _____'s Day Care(s):
 _____, County, Texas
 _____'s School(s):
 _____, County, Texas
 _____'s Place(s) of Employment or Business:
 _____, County, Texas
 _____'s Residence(s):
 _____, County, Texas
- Engaging in conduct directed specifically toward the Applicant or any member of the Applicant's family or household, including following the person, that is reasonably likely to harass, annoy, alarm, abuse, torment, or embarrass the person,

- Possessing a firearm, unless the alleged offender is a peace officer, as defined by Section 1.07, Penal Code, actively engaged in employment as a sworn, full-time paid employee of a state agency or political subdivision.
- IT IS ORDERED that Respondent to take the following action as specified by the court necessary or appropriate to prevent or reduce the likelihood of future harm to the applicant or a member of Applicant’s family or household: _____

SERVICE

This Order:

- was served on Respondent in open court;
- shall be personally served upon Respondent in the same manner as a writ of injunction.

THE CLERK IS ORDERED to send a copy of this order to the Chief of Police of the City of _____, _____, County, Texas.

THE CLERK IS ALSO ORDERED to send a copy to the child care facility or school.

WARNING

A PERSON WHO VIOLATES THIS ORDER MAY BE PUNISHED FOR CONTEMPT OF COURT BY A FINE OF AS MUCH AS \$500 OR BY CONFINEMENT IN JAIL FOR AS LONG AS SIX MONTHS, OR BOTH.

NO PERSON, INCLUDING A PERSON WHO IS PROTECTED BY THIS ORDER, MAY GIVE PERMISSION TO ANYONE TO IGNORE OR VIOLATE ANY PROVISION OF THIS ORDER. DURING THE TIME IN WHICH THIS ORDER IS VALID, EVERY PROVISION OF THIS ORDER IS IN FULL FORCE AND EFFECT UNLESS A COURT CHANGES THE ORDER.

IT IS UNLAWFUL FOR ANY PERSON, OTHER THAN A PEACE OFFICER, AS DEFINED BY SECTION 1.07, PENAL CODE, ACTIVELY ENGAGED IN EMPLOYMENT AS A SWORN, FULL-TIME PAID EMPLOYEE OF A STATE AGENCY OR POLITICAL SUBDIVISION, WHO IS SUBJECT TO A PROTECTIVE ORDER TO POSSESS A FIREARM OR AMMUNITION.

A VIOLATION OF THIS ORDER BY COMMISSION OF AN ACT PROHIBITED BY THE ORDER MAY BE PUNISHABLE BY A FINE OF AS MUCH AS \$4,000 OR BY CONFINEMENT IN JAIL FOR AS LONG AS ONE YEAR, OR BOTH. AN ACT THAT RESULTS IN A SEPARATE OFFENSE MAY BE PROSECUTED AS A SEPARATE OFFENSE IN ADDITION TO A VIOLATION OF THIS ORDER.

EXPIRATION DATE

This Sexual Assault Protective Order shall continue in full force and effect until the ____ day of _____, 20____.

Signed this ____ day of _____, 20____, at ____ o'clock __.m.

JUDGE PRESIDING

RECEIPT ACKNOWLEDGED

I hereby acknowledge that I have received a copy of this Sexual Assault Protective Order.

Respondent.

AGREED ORDER Approved as to form and content:

Respondent

Applicant