



SHINGLE SPRINGS BAND OF MIWOK INDIANS TRIBAL COURT

P.O. Box 1340, Shingle Springs, CA 95682

Telephone: (530) 698 – 1446

Website: <https://www.shinglespringsrancheria.com/tribal-court/>

INFORMATION OF PERSON FILING FORM:

Name: _____

Address: _____

Phone: () _____

Email: _____

(Check which apply) I am:

Petitioner

Other: _____

Attorney/Advocate for:

CASE NO.: _____

**PETITION FOR TEMPORARY/
PERMANENT PROTECTION ORDER**
[FOR COURT USE ONLY]

Note to Petitioner. This Petition form is long. It is meant to collect as much information as you are able to provide. You may need to complete the form at different sittings. Individuals completing this form about their own situation may find the form difficult to complete, please contact the Tribal Court’s Self-Help Center or the Wadaapé Project. They may have resources to assist you with completing the form.

- 1 This is a Petition for a (Check which apply) Temporary; Permanent Protection Order.
 - a. If Temporary if checked, is it *Ex Parte* (no notice to Respondent)? Yes; No

- 2 The Petitioner is asking for the following: (Choose that which apply. See Information Sheet for description of each one. The reference to ‘you’ or ‘my’ refers to the person to be protected.)
 - a. No Personal Contact order;
 - b. Stay-Away order; Respondent must stay at least ___ yards away from: (Choose any that apply): Me; My home; My job/workplace; My vehicle; My school; My child/ren; My child/ren’s school/child care center; Other _____
 - c. Move-out order;
 - d. Authorization of Recording of Unlawful Communications;
 - e. Property Control. (Please use handout DV-101e & attach to petition.)
 - f. Dividing Assets. (Please see handout DV-101f & attach to petition.)

CASE NAME:	CASE NO:
------------	----------

g. Animals: Possession and Stay-Away order; Respondent must stay _____ yards away from the animal(s) listed below and must not take, attack, injure, sell, remove, hide, strike, threaten, harm, cause others to take, attack, injure, sell, remove, hide, strike threaten, harm or otherwise dispose of the following animal(s): _____

Further, I ask for sole possession, control and care of the animal(s) above because:

- 3 Petitioner identity: Petitioner is:
- a. Person to be protected
 - b. Tribal Agency/Department filing on behalf of person to be protected
 - c. Private Attorney/Lay Advocate filing on behalf of person to be protected
 - d. Family/Friend filing on behalf of person to be protected
 - e. Other: _____

NOTE: From this point on, the Petition will ask for information regarding the PERSON TO BE PROTECTED which may or may not be the Petitioner.

- 4 Is PERSON TO BE PROTECTED a:
- a. SSBMI Tribal Member;
 - b. Member of another Tribe: *(list Tribe)* _____
 - c. Not a Member of any Tribe

- 5 What is PERSON TO BE PROTECTED's:
- a. Address: _____

Is this address on the Rancheria? Yes; No.

- b. Phone number: _____
- c. Email address/es: _____
- d. Date of Birth: _____

- 6 Does PERSON TO BE PROTECTED want to keep their address/phone/email confidential? Yes; No. *[This means the Respondent does not have this information and the PERSON TO BE PROTECTED does not want to share it with the Respondent out of a fear for PERSON TO BE PROTECTED's safety.]*

- 7 Name of Respondent: *(Person to be protected from. Include any aliases they use.)*

CASE NAME:	CASE NO:
------------	----------

- 8 Is the Respondent a:
- a. SSBMI Tribal Member
 - b. Member of another Tribe: *(list Tribe)* _____
 - c. Not a member of any Tribe

- 9 Please provide the Respondent's**:
- a. Address: _____

- b. Telephone number(s): _____

- c. Email address: _____

- d. Social media address (Twitter/Facebook/Instagram/TikTok etc.): _____

**If current information is not know, please use last known information for Respondent.
 Check if here only if NONE of Respondent's contact information is known.

- 10 Please describe the Respondent as best as possible:
- Male; Female; Nonbinary Height: _____ Weight: _____ Eye Color: _____
- Hair Color: _____ Race: _____ Date of Birth : _____
- Tattoo(s)/Scar(s): _____

- 11 What is the family or household relationship between the PERSON TO BE PROTECTED and Respondent? *(Choose any that apply)*:
- Current Domestic Partners or married couple.
 - Used to be Domestic Partners or now separated/divorced couple.
 - Currently live together.
 - Used to live together.
 - Dating or used to date.
 - Related by blood, marriage, or adoption. Specify how related: _____
 - Have children together.

CASE NAME:	CASE NO:
------------	----------

12 *[If PERSON TO BE PROTECTED and Respondent have/had child/ren together, please answer this question. If PERSON TO BE PROTECTED and Respondent do not have child/ren together, skip to Question 13.]*

- a. Full Name: _____
- b. Date of birth: _____ SSBMI Member: Yes; No
- c. Member of different tribe? Yes; No. If Yes, list Tribe: _____
- d. Who has custody of this child: _____

e. Where does this child reside: _____

(Please use separate sheet to provide this same information for each child.)

13 Does the Respondent have a history of Domestic Violence either against the PERSON TO BE PROTECTED or against anyone else? If so, please include the dates (*if known*), locations and description of past abuse. *[Note: This section is for past abuse only and not for the current abuse that is the subject of this Petition. Current domestic violence must be described in Question 15.]*

(You may attach additional sheets if you need more space to write your answer.)

14 Has PERSON TO BE PROTECTED asked for any restraining orders against Respondent in the past? If yes, please list all criminal and civil orders which were requested. Also list all orders that were granted.

(Use separate sheet to list all, if needed.)

15 Has anyone else asked for restraining orders against Respondent in the past? If yes, please list all criminal and civil orders which were requested and by who. Also list all orders that were granted. _____

(Use separate sheet to list all, if needed.)

CASE NAME:	CASE NO:
------------	----------

16 Please describe the Respondent's behavior or actions (which caused fear) and the injuries suffered by the PERSON TO BE PROTECTED. (All physical, mental and emotional injuries, destruction of property, loss of employment etc. which lead to Petitioner filing this Petition should be described here.) Please include the dates of Respondent's acts. *Note: actions can include having a reasonable cause to believe that there is a danger.*

Respondent's Domestic Violence Actions	Petitioner's Injury (if any)
Date it happened: _____ Did this happen on Rancheria Lands? <input type="checkbox"/> Yes; <input type="checkbox"/> No If yes, where: _____ What happened?	
Date it happened: _____ Did this happen on Rancheria Lands? <input type="checkbox"/> Yes; <input type="checkbox"/> No If yes, where: _____ What happened?	
Date it happened: _____ Did this happen on Rancheria Lands? <input type="checkbox"/> Yes; <input type="checkbox"/> No If yes, where: _____ What happened?	

(You may attach additional sheets if you need more space to write your answer.)

CASE NAME:	CASE NO:
------------	----------

17 Did the Respondent abuse the PERSON TO BE PROTECTED's children or other children?
 Yes; No.

18 If yes, please describe when, how and where this happened: _____

(You may attach additional sheets if you need more space to write your answer.)

I declare under penalty of perjury under the laws of the Shingle Springs Band of Miwok Indians that the foregoing is true and correct.

Date: _____

Petitioner [TYPE OR PRINT NAME]

Signature

NOTE: Upon filing this Petition, the Court will set a hearing. If the judge does not make the orders effective right away the judge may still make the order(s) after the hearing.