



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/>

## PUBLIC GUIDE INFORMATION SHEET

### TOPIC: Temporary or Permanent Protection Order

#### **How to Fill Out a Petition for Temporary/Permanent Protection Order, Form DV-101**

Please read these instructions before filling out the form. If you have questions, please contact the Clerk of the Court or your Wadaapé Advocate. While Court staff cannot provide you with legal advice, staff may be able to provide you with referrals and resources to those who can assist you.

**Note:** *DON'T PANIC!* We know these instructions are long. They are detailed so that you can understand how to fill out the Petition correctly. The more complete your form, the easier it is for the judge to know what has happened and what you would like to happen. Remember to ask for help from the Wadaapé Project staff if these instructions get too overwhelming. They can help.

**Information of person Filing Form:** Please provide your name, address, and phone number in the “Information of Person Filing Form” section. Then check the box that best describes who you are:

- Check “Petitioner” if you are the person who brought the case to court or asked the court to review the case.
- Check “Other” if you are not the Petitioner, the Respondent, or an Attorney/Advocate for someone else. Then, describe who you are on the line provided (e.g. Grandparent of Child, Petitioner’s Employer, etc.).
- Check “Attorney/Advocate” if you are filling out this form on behalf of someone else either as their attorney or their advocate and write the name of the person you are representing on the line provided.

**Case No.:** You do **not** need to fill in the case number. The Tribal Court will fill this in.

#### **Question 1. Temporary or Permanent Protection Order**

In this section you are asking the Court for a Protection Order that is either temporary (up to 30 days) or permanent (up to 1 year) or both (temporary until the hearing, then permanent after that.) Check as many boxes as you need. If you select “*temporary*,” proceed to section a.

- a. *Ex Parte* means that **no notice of the hearing goes to Respondent** (the person against whom the Protection Order is being requested). *Ex Parte* is given when the case is urgent & time sensitive such as when you are in fear of immediate harm or injury by the Respondent. Select “YES” if the request is urgent and no notice needs to be given to the Respondent. Select “NO” if the request is not urgent, and you want the Respondent to be notified of the Temporary Protection Order request within standard processing time. \*Note: Selecting “NO” can delay the issuance of the Protection Order – in cases of emergency, *Ex Parte may be recommended*.

**Question 2. Specific Conditions of the Protection Order:** This section will ask you to choose



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the conditions of your Protection Order. Please select each box which applies to your request for protection. Select all that apply.

- a. No Personal Contact order: Checking this box requests the court to order Respondent to avoid contact & communication directly with the person being protected.
- b. Stay-Away order: Checking this box requests the court to order Respondent to maintain a physical distance away from the person(s) being protected. A standard distance for Stay-Away is 100 yards. Please select who and where the Respondent will be ordered to stay away from in the options listed in section b.
- c. Move-Out Order: Checking this box requests the court to order that the Respondent move out of any shared housing or mutual residence for the safety of the person(s) being protected.
- d. Authorization of Recording Unlawful Communications: Checking this box requests that the court allow the person(s) being protected to record the Respondent's unlawful communications. For example, if the Respondent continues to call and threaten you, their calls, voicemails, emails, text messages etc. may be recorded as proof that they continue to unlawfully communicate with you. Also, if the court orders Respondent to stop calling you but Respondent continues anyway that is also unlawful because they were ordered to stop.
- e. Property Control: Checking this box requests that the court decide who can control certain property. This request requires an additional form to be attached to the Petition for a Protection Order. **Form DV-101e** requests the court to give **only the Person to Be Protected** the temporary use, possession and control of the property described in the form. Property may include any of the following: vehicles, bank accounts, mobile phones & mobile plans, Tribal Per Capita payments, Tribal Stipends for Minors, social media accounts and more. Please fill out & attach **form DV-101e** if you check Property Control under question 2e.
- f. Dividing Assets: Checking this box requests that the court divide up certain assets between the Person to be Protected and the Respondent -- and requires an additional form to be attached to the Petition for this Protection Order. **Form DV-101f** requests the court to divide assets for the duration of the Protection Order. Assets may include any of the following: Real Property (land/houses), Vehicles, Bank Accounts, Personal effects, and other property. Please fill out & attach **form DV-101f** if you check Dividing Assets under question 2f.
- g. Animals: Checking this box requests that the court extend a possession and Stay-Away order to animals including pets, and livestock. This prevents Respondent from any of the following: taking, attacking, injuring, selling, removing, hiding, striking, threatening, harming, and causing others to take, injure, sell, remove, hide, strike, threaten, harm, or otherwise dispose of any animals that belong to the Person to Be Protected under this order. In this section, the Person to Be Protected may request for sole possession, control and care of the animals to be listed and described in question 2g.



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**Case Name and Number at top of Page 2.** At the top of page 2 write in the same names you wrote on for questions 3 and 7. Leave the case number blank.

**Question 3. Petitioner Identity**

This section will ask you to check the box that describes who you are; please check the appropriate box that applies.

**From this question on, the Petition for a Protection Order will ask for the details of the Person to Be Protected, which may or may not be the Petitioner (person filing this form.)**

**Question 4: Tribal Identity of the Person to Be Protected:** Please select the box which best describes the Person to Be Protected as follows: SSBMI Tribal Member, Member of another Tribe, or Not a Member of any Tribe.

**Question 5: Information about the Person to Be Protected:** This section asks for the address, telephone number and email address of the person to be protected.

**Question 6: Request for Confidentiality:** By marking ‘YES’ to this question, you are asking for the Person to Be Protected’s contact information to remain **private** and **not to be shared with the Respondent** out of fear for the safety of the Person to Be Protected. On the other hand, by marking ‘NO’ the Person to Be Protected’s contact information will not be kept confidential from the Respondent on court documents. Check the box that applies to your situation.

**Question 7: Respondent’s Name:** The Respondent is the person who will be restrained by the Protection Order. Please write down the full name and any aliases or nicknames of the Respondent.

**Case Name and Number at top of Page 3.** At the top of page 3 write in the same names you wrote on for questions 3 and 7. Leave the case number blank.

**Question 8: Tribal Identity of the Respondent:** Please check the box which best describes the Person to Be Protected as follows: SSBMI Tribal Member, Member of another Tribe, or Not a Member of any Tribe.

**Question 9: Respondent’s Contact Information:** This section asks for the Respondent’s address, telephone number, email address and social media address(es). There is a box that can be checked if NONE of the Respondent’s information is known.

**Question 10: Description of the Respondent:** This section is asking for the best possible description of the Respondent; please check all boxes and fill in the details that apply. This is an important question. **Please fill as much as possible.**



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**Question 11: Relationship Status:** This section asks how the Person to Be Protected is related to the Respondent. Please select ALL boxes that apply.

**Case Name and Number at top of Page 4.** At the top of page 4 write in the same names you wrote on for questions 3 and 7. Leave the case number blank.

**Question 12: Identity & Information of Children to Be Protected:** IF the Person to Be Protected and the Respondent **have children together**, please fill out all the information details of each child. Each child should have their own section – a separate sheet of paper may be used if there is more than one child together. Do not include Respondent’s stepchildren or children who are not related to both the Respondent and Person to be Protected. Those children will be included in question 17.

**Question 13: History of Domestic Violence:** Please describe, as best as you can, any history of abuse that Respondent has had either with the Person to Be Protected or anyone else. This is the section where the abuser’s past repeat domestic violence behavior can be explained. Remember this is only for past abuse. Current abuse is described in Question 16.

**Question 14: History of Restraining Orders by Person to Be Protected:** If there are prior Restraining Orders against the Respondent by the current Person to Be Protected, please list them here.

**Question 15: History of Restraining Orders by Anyone Else:** If there are prior Restraining Orders against the Respondent by anyone else, please list them here, if you know of any.

**Case Name and Number at top of Page 5.** At the top of page 5 write in the same names you wrote on for questions 3 and 7. Leave the case number blank.

**Question 16: Current Abuse:** Here is where you are going to describe what is currently going on. List the date of each incident. Describe where it happened, what happened, what was said. In the far-right column, describe any injuries you suffered because of this incident. If there were several incidents, please list each one separately. If you need more space to write, attach a sheet of paper with your additional information. Include all physical, mental and emotional injuries, destruction of property, loss of employment, isolation from family, friends, community etc. committed by the Respondent which led to your filing this request for a Protection Order. It will be important for the court to know what happened so please provide as much detail as you feel comfortable disclosing.

**Case Name and Number at top of Page 6.** At the top of page 6 write in the same names you wrote on for questions 3 and 7. Leave the case number blank.

**Question 17: Other Children:** If you have information that the Respondent abused other children (children that the Person to be Protected and Respondent did not have together), then check ‘Yes’.



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Otherwise, check ‘No’.

**Question 18: Other Children Description:** If you checked ‘Yes’ to Question 17, please describe the abuse by Respondent on other children. Otherwise, if you checked ‘No’ leave this question blank.

**Signature:** Finally, please write the date that you completed this form on the lines provided and write and sign your name on the lines below.

**Note:** By signing and dating this form, you are promising that the information you have provided on this form is truthful and correct. If you are not truthful, the court may hold you in contempt or you could be accused of perjury (lying to the court).

**If you have any questions about how to fill out this form, or about the protection orders or court process in general, contact the Wadaapé Project at (530) 698-1451.**

**or Tribal Court Self Help Center at:**

Shingle Springs Band of Miwok Indians

Tribal Court

5281 Honpie Road

Placerville, CA 95667

(530) 698-1446

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Self Help Center

**Open 8-5, M-F**

**Attorney consultation by appointment only.**

