

INSTRUCTIONS FOR PETITIONS TO PROHIBIT WORKPLACE VIOLENCE

Under Indiana Code 34-26-6, courts can issue orders to protect an employee from unlawful violence or credible threats of violence. These orders can be requested by the employer of a person who is the target of unlawful violence or credible threats of violence, and will be enforced by law enforcement officers. These orders are called “Workplace Violence Restraining Orders” (WVRO’s). There are 2 kinds of WVRO’s—a temporary restraining order (TRO) issued without a hearing that lasts a maximum of 15 days, and an injunction (an order issued after a hearing) that lasts up to 3 years.

The employer asking for these orders is called the “plaintiff”. The plaintiff needs to file a petition in a court of record, on behalf of his or her employee, against the other person (the “defendant”) to get these orders. There will be a court hearing within 15 days of the filing of the petition.

This instruction booklet explains what court orders an employer can get and how to get them. These instructions cannot cover all of the problems and questions that may arise in a particular case. If you do not know what to do to protect your rights, you should see an attorney. The Clerk, the Court, and other court staff are prohibited from giving you legal advice.

These forms can be used only by an employer of a person who is the target of unlawful violence or a credible threat of violence.

GENERAL INFORMATION

Who can get a court order under this law?

This statute allows **employers** to obtain court orders prohibiting unlawful violence or credible threats of violence against their employees. To get an order under this law, the plaintiff **must** be an employer. An employer means:

- a person defined as an employer, including
 - an individual;
 - a partnership;
 - an association;
 - a limited liability company
 - a corporation;
 - a business trust;
 - the state;
 - a governmental agency; or
 - a political subdivision;that has at least two (2) employees during any work week.

Before completing the forms needed to obtain court orders under this statute, make sure you meet the definition of “employer”.

Whom can an employer protect under this law?

Under this statute, employers can obtain court orders, known as **Workplace Violence Restraining Orders (WVRO’s)** which last up to 3 years on behalf of employees and certain family or household members. The definition of an employee includes:

- a person employed or permitted to work or perform a service for remuneration;
- a member of a board of directors for a private, public, or quasi-public corporation;
- an elected or appointed public officer; and,
- a volunteer or an independent contractor who performs services for an employer at the employer’s place of work.

An employer may seek protection under this law if:

1. An employee has experienced **unlawful violence** or a **credible threat of violence** from any person;
2. The unlawful violence or credible threat of violence **did occur at the workplace** or **can reasonably be construed to be carried out in the workplace**;

3. The defendant's conduct is **not part of a labor dispute**; and,
4. The defendant is **not engaged in constitutionally protected activity**.

What is “unlawful violence”?

“**Unlawful violence**” is defined by the law as meaning Battery under IC 35-42-2, or Stalking under IC 35-45-10. In Indiana, a “battery” occurs when one person knowingly or intentionally touches another person in a rude, insolent, or angry manner, except in self-defense or defense of others.

According to the Indiana criminal code, “**Stalking**” means a knowing or intentional course of conduct involving repeated or continuing harassment of another person that would cause a reasonable person to feel terrorized, frightened, intimidated, or threatened, and that actually causes the victim to feel terrorized, frightened, intimidated, or threatened. The term does not include statutorily or constitutionally protected activity.

What is a “credible threat of violence”?

A “credible threat of violence” under this law means a knowing and willful statement or course of conduct that does not serve a legitimate purpose and that causes a reasonable person to fear for the person's safety or for the safety of the person's immediate family.

What does “course of conduct” mean?

The term “course of conduct” as used in the WVRO law means a pattern of conduct composed of a series of acts over time, however short, indicating a continuity of purpose, that includes the following:

- (1) Following or stalking an employee to or from the employee's place of work;
- (2) Entering the employee's place of work;
- (3) Following an employee during the employee's hours of employment;
- (4) Making telephone calls to an employee during the employee's hours of employment;
- (5) Sending correspondence to an employee by means such as public or private mail, interoffice mail, fax, or electronic mail.

What do you need to get the court orders or to object to them?

1. Workplace violence **forms**, available from the court clerk's office, legal publishers, or from the following Web site:
<http://www.in.gov/judiciary/forms/po.html>
2. Someone, other than yourself, 18 years of age or older, to deliver (“serve”) certain papers to the other party.

What forms must be used for petitioning under the workplace violence law and for opposing those petitions?

1. *Petition of Employer for Injunction Prohibiting Violence or Threats of Violence Against Employee* (“Petition”). This form tells the judge the facts of the plaintiff's case and what orders the plaintiff wants the court to issue. This form is mandatory—it must be used to ask for a **WVRO**.
2. *Order to Show Cause and Temporary Restraining Order*. The *Order to Show Cause*, when signed by the judge, tells the defendant to come to court for the hearing. It may include a *Temporary Restraining Order* that takes effect immediately and stays in effect until the hearing (not more than 15 days). A Temporary Restraining Order is one type of **WVRO** (**Workplace Violence Restraining Order**).
3. *Response to Petition of Employer for Injunction Prohibiting Violence or Threats of Violence* (“Response”). The defendant files this form to state objections to the orders the plaintiff has asked the court to issue and to give his or her side. This form is mandatory—it must be used by a defendant to respond to a petition.
4. *Order After Hearing on Petition of Employer for Injunction Prohibiting Violence or Threats of Violence Against Employee* (“Injunction”). This is the form signed by the judge after the hearing. This order will stay in effect for up to 3 years, depending on what the judge decides. The order issued after a hearing, or injunction, is the other type of WVRO.
5. *Proof of Personal Service* and *Proof of Service of Completed Response*. These forms are used to show that the other party has been served with the legal documents as required by law.

Should you see a lawyer?

In general, you have the right to file a petition or defend against one and go to court with or without an attorney. Because your situation may involve unique problems, you may want to consult with an attorney. Whether or not you have a lawyer, the other party may have one.

If the employer is a corporation, the rules that govern the corporation's representation before a particular court apply.

What does the phrase “ex parte” mean?

The term “ex parte” means “one-sided.” A basic principle in our legal system is that **all sides** to a dispute get to present their case to a judge before the judge makes a decision on the case and issues an order or a ruling. All parties to a case have a **right to be notified** that a legal action is being taken against them, and they have a **right to be heard** and to dispute the action in court.

An ex parte order is contrary to this principle. It is issued after the judge has only heard one side of the case, and before the opposing side even has notice that legal action is being taken against them. An ex parte order is rare in the justice system. Ex parte orders are granted by courts in exceptional circumstances. If you are requesting a TRO in this case, that means you are requesting an “ex parte” order.

Are TRO's automatically issued?

No. As just explained, orders of this type are only granted in exceptional circumstances. Court orders are not issued just because a person asks for one. It is important that you pay attention to every detail in filling out your Petition. The Judge who reviews the Petition will carefully examine the information in the Petition to determine if the situation meets the statutory, or legal, requirements for a TRO.

Why might my request for a TRO be denied?

There are many reasons why the TRO might be denied. Some of the most common reasons include:

- The parties do not fit the statutory, or legal, definition of “employer” and “employee”.
- The parties do not meet Indiana residency or employment requirements.
- The factual allegations do not meet the statutory, or legal, definitions of “unlawful violence”, or of a “credible threat of violence”.
- The allegations are vague. They lack a clear and understandable description of the time, place, or acts of the incident.
- If you are relying solely on what another person saw or told you, a failure to have a sworn affidavit from that other person.

INSTRUCTIONS FOR PLAINTIFFS

What steps need to be taken to get the court orders?

1. You will need at least 5 copies of each workplace violence form: one for a worksheet; the original to file with the court; a copy to be personally delivered (served) to the defendant; and, two copies for yourself. In addition, you will need extra copies of the *Order to Show Cause/TRO*, the *Order After a Hearing/Injunction*, and the *Proof of Service* forms. Get at least 3 extra copies for yourself. Finally, you will need a *Confidential Form*.
2. Fill in the *Petition* and the *Order to Show Cause/TRO* except for the dates for the court hearing and service, the case number, and the judge's signature. Courts may require that the forms be typewritten. **The Petition is a public document. A copy of the Petition will be kept in the Court's file. Also, if a TRO is granted or if the case is set for a hearing, a copy of the Petition will be sent to the defendant.**
 - a. If you are not represented by an attorney, fill in your name, mailing address, and phone number at the end of the *Petition*. You may, but are not required to, provide a fax number and e-mail address where you may be contacted.
 - b. Fill in the name of the county where the case will be filed and the court name.
 - c. Type your full name, the defendant's full name, and the employee's full name. If you are seeking orders to protect more than one employee, you should fill out a separate set of forms for each employee to be protected. If you need more space, attach additional pages and refer to the additional pages in Paragraph 20 of the *Petition* form.
 - d. Check ("X") all boxes that apply to your case. Read each item carefully and fill in the necessary information. Be specific.
 - e. Remember to date and sign the *Petition*.
3. If you are applying for a TRO, you must give the details of the recent acts of violence or credible threats of violence and the problems they have caused your employee. Place an "X" in the caption of the *Petition* next to "Application for Temporary Restraining Order."

To obtain a TRO, you must notify the defendant of the application for the order unless both of the following requirements are satisfied:

- a. It appears from the facts in the *Petition* (and/or affidavits) that great or irreparable injury will result before the case can be heard with notice given to the defendant; **and**,
- b. You or your attorney certifies one of the following to the judge under oath:
 - (1) That within a reasonable time before filing the *Petition* you informed the defendant or the defendant's attorney, orally or in writing, at what time and where the application for a TRO would be made; **or**,
 - (2) That you in good faith attempted, but were unable to, inform the defendant and the defendant's attorney, and you specify the efforts you made to contact them; **or**,
 - (3) That for reasons you specify in writing, you should not be required to inform the defendant or the defendant's attorney.
4. If you are seeking WVRO's on the basis of information given to you by other persons (for example, the employee who was threatened, or other employees), and not on the basis of what you personally observed, you must attach to the *Petition* affidavits by the people who have personal knowledge of the facts that support the granting of a WVRO.
5. Take all of your completed forms and all copies to the clerk's office. The clerk will tell you where to take your papers.
6. If the judge signs the *Order to Show Cause*, take the original and all copies back to the court clerk. The clerk will place a case number on all of the papers. The clerk will file-stamp the copies (showing the date of filing). The clerk will file the originals and give you the copies. Ask for at least 3 file-stamped copies. Keep at least one for yourself and give the others to the employee and other people, if any, who are protected under the WVRO. If you or the employee has to call the police, they will want to see the copies of your papers. The clerk will keep the *Confidential Form* so that the WVRO can be entered into the computer system in order to allow the police to verify it.
7. Have the defendant personally served with copies of the *Petition* and the *Order to Show Cause*, and the blank forms of the *Response* and *Proof of Service of Completed Response*. You **cannot** serve the defendant yourself. Service may be made by a sheriff, by a deputy of the sheriff, or by a person specially or regularly appointed by the court for that purpose. A person who is not a sheriff, a sheriff's deputy, or a court-appointed process server can serve legal papers, as long as he or she testifies to the court about the service, acts promptly, and exercises reasonable care to cause service to be made. In most cases, the sheriff or a deputy

will serve the papers for you. The clerk will tell you how to get the papers to the sheriff's office for service. If you use someone other than a sheriff, a deputy, or a court-appointed server, that person will need to fill out the *Proof of Service* forms and return them to the clerk.

Service is very important. It tells the defendant about the order and the hearing. Without it, there will not be a court hearing and your temporary order will expire unless the judge extends it. The defendant must be personally served immediately after the orders are signed by the judge, unless the judge specifies a different time for service.

8. If you have requested a temporary order and the judge granted it, get file-stamped copies of the TRO and immediately deliver a file-stamped copy of the TRO to each law enforcement agency (police, sheriff, town marshal, etc.) that you want to be aware of the order and enforce it.
9. After the defendant has been personally served, the person who served the defendant must complete and sign the original Proof of Service form and return it to the court clerk. You should obtain file-stamped copies of this form—some to keep for yourself, and some to deliver to the law enforcement agencies you visited in Paragraph 8 above.
10. Go to the court hearing with any and all evidence you might have. The *Order Issued After a Hearing/Injunction* should be filled in and given to the judge for signing. If there are any witnesses to the defendant's conduct, they should also be at the hearing.
11. If the judge signs the *Order Issued After a Hearing/Injunction*, file the original with the clerk and get file-stamped copies. You should immediately deliver some of those copies to the law enforcement agencies you want to know about the WVRO.

If the defendant was not present in court for the hearing, arrange to have the defendant personally served with a copy of the *Order Issued After a Hearing/Injunction*. Again, make sure the completed *Proof of Personal Service* form is filed with the court and deliver file-stamped copies to the law enforcement agencies. Keep at least 3 copies for yourself—one for your employee, one for any other protected person, and one to keep for yourself.

INSTRUCTIONS FOR THE DEFENDANT

1. If you are served with an *Order to Show Cause*, and a *Petition of Employer for Injunction Prohibiting Violence or Threats of Violence Against Employee*, you should promptly seek legal advice. If you have no attorney, the lawyer referral service of your local bar association may be helpful. The Clerk, the Court, and other court staff are prohibited from giving you legal advice.
2. Read the papers served on you very carefully. The *Order to Show Cause* tells you when to appear in court and may contain a temporary restraining order (TRO) forbidding you from doing certain things. **If you disobey the court's orders, criminal charges may be filed against you.**
3. If you wish to oppose the *Petition*, or to make your own request for court orders, you must file a *Response to Petition of Employer for Injunction Prohibiting Violence or Threats of Violence Against an Employee* ("Response").

In addition to the *Response*, you may file and serve affidavits signed by people who have personal knowledge of the facts. These people are, of course, witnesses, and they must come to the hearing with you. After you have filed the *Response* with the clerk of the court, a copy must be delivered personally or by mail to the plaintiff or the plaintiff's attorney.

You cannot serve the plaintiff yourself. The person who does serve your papers should complete and sign a *Proof of Service of Completed Response* form. You should make sure that form is filed with the clerk of the court.

4. If you wish to oppose the *Petition*, in addition to filing a *Response*, you should be present at the hearing. If you have any witnesses, they must also be present.

Cover Sheet for Protection Order, No Contact Order, Child Protective Order, Workplace Violence Restraining Order

COVER SHEET (Check Only One)		Case No. <input style="width: 90%;" type="text"/>
Protection Order <input type="checkbox"/> IC 34-26-5	Child Protective Order <input type="checkbox"/> IC 31-34-2.3	Court <input style="width: 90%;" type="text"/>
No Contact Order <input type="checkbox"/> IC 31-32-13 <input type="checkbox"/> IC 33-39-1-8 <input type="checkbox"/> IC 35-33-8-3.6 <input type="checkbox"/> IC 31-34 <input type="checkbox"/> IC 35-33-8-3.2 <input type="checkbox"/> IC 35-38-1-30 <input type="checkbox"/> IC 31-37 and/or 35-38-2-2.3		INDIANA
Workplace Violence Restraining Order <input type="checkbox"/> IC 34-26-6		County _____

PETITIONER/PROTECTED PERSON/CHILD'S NAME IF CHILD IS PROTECTED PERSON

First	Middle	Last

And/or on behalf of minor family member(s): [List name, Sex, Race & Birth Year]

PETITIONER/PROTECTED PERSON IDENTIFIERS

BIRTH YEAR	SEX	RACE

Other Protected Persons/Birth Year/Sex/Race:

V.

RESPONDENT/DEFENDANT

First	Middle	Last

Relationship between Petitioner/Protected Person: _____

Respondent's/Defendant's Address: _____

RESPONDENT/DEFENDANT IDENTIFIERS

SEX	RACE	DOB	HT	WT
EYES	HAIR	DISTINGUISHING FEATURES		
DRIVERS LICENSE #		STATE	EXP DATE	

CAUTION: Weapon Involved Weapon Present on the property

THE COURT FINDS:
 That it has jurisdiction over the parties and subject matter, and the Respondent/Defendant has been or will be provided with reasonable notice and opportunity to be heard.

Additional findings of this order follow on succeeding pages.

THE COURT ORDERS:
 The Respondent/Defendant is restrained from committing further acts of abuse or threats of abuse to the Petitioner/Protected Person.
 ___ Yes ___ No The Respondent/Defendant is Brady disqualified.
 ___ The Respondent/Defendant is restrained from any contact with the Petitioner. OR ___ The Respondent may only contact the Petitioner in the conditions in paragraph (s) ___ of the order.

Additional terms of this order follow on succeeding pages.

The terms of this order shall be effective until: (Check Only One)
 _____ [date]
 further order of the court.

WARNINGS TO RESPONDENT/DEFENDANT:

This order shall be enforced, even without registration, by the courts and law enforcement personnel of any state, the District of Columbia, any U.S. Territory, and may be enforced by Indian Tribal Government (18 U.S.C. Section 2265). Crossing state, territorial, or tribal boundaries to violate this order may result in Federal imprisonment (18 U.S.C. Section 2262). Federal law provides penalties for possessing, transporting, shipping, or receiving any firearm or ammunition (18 U.S.C. Section 922(g)(8)).

Only the Court can change this order. [The following court information is required by statute.]

Court Phone (219) _____ Court Hours: M-F 8:30am-12pm & 1pm-4:30pm
 To verify status, call: Clerk (219)- _____ Sheriff (219) 477-3000

STATE OF INDIANA)
COUNTY OF _____) SS:

IN THE _____ COURT ____
(_____ DIVISION, ROOM ____)

_____,)
Petitioner)
vs.)

CASE NO: _____

_____,)
Respondent)

**SUPPLEMENT TO COVER SHEET
PROTECTION ORDER**

PROTECTED PERSONS

FIRST	MIDDLE	LAST	BIRTH YEAR	SEX	RACE

FIRST	MIDDLE	LAST	BIRTH YEAR	SEX	RACE

FIRST	MIDDLE	LAST	BIRTH YEAR	SEX	RACE

FIRST	MIDDLE	LAST	BIRTH YEAR	SEX	RACE

FIRST	MIDDLE	LAST	BIRTH YEAR	SEX	RACE

FIRST	MIDDLE	LAST	BIRTH YEAR	SEX	RACE

FIRST	MIDDLE	LAST	BIRTH YEAR	SEX	RACE

STATE OF INDIANA) IN THE _____ COURT _____
)SS: (_____ DIVISION, ROOM _____)
COUNTY OF _____)

CASE NO. _____

PLAINTIFF: _____
DEFENDANT: _____
EMPLOYEE: _____

PETITION OF EMPLOYER FOR INJUNCTION PROHIBITING VIOLENCE OR THREATS OF VIOLENCE AGAINST EMPLOYEE

Application for Temporary Restraining Order

Read the Instructions for Petitions to Prohibit Workplace Violence before completing this form. NOTE: Plaintiff must be an employer with standing to bring this action under IC 34-26-6-4.

IMPORTANT: This is a public document and a copy of it will be placed in the Court's file. A copy may also be sent to the Defendant.

1. Plaintiff (*name*): _____ is a _____ corporation
_____ sole proprietorship _____ other (*specify*): _____
and is filing this case on behalf of the employee identified in Paragraph 2.
2. Employee (*name*): _____
Sex: _____ Male _____ Female
Date of birth: _____
(*Use a separate petition for each employee you are seeking to protect.*)
3. Defendant (*name*): _____
 - a. Resides at (*state address and county*): _____
 - b. Works at (*state address and county*): _____
 - c. _____ Is _____ Is not a current employee of plaintiff
(*explain if defendant is still an employee*): _____
4. This case is filed in this county because
 - a. _____ defendant resides in this county.
 - b. _____ defendant has caused physical or emotional injury to plaintiff's employee in this county.
 - c. _____ other (*specify*): _____

5. Defendant has battered stalked or made a credible threat of violence against the employee by knowing or willing statements or a course of conduct that would place a reasonable person in fear for his or her safety, or the safety of his or her immediate family.

a. One of more of these acts can reasonably be construed to be carried out or to have been carried out at the employee's workplace at (*address*):

b. Describe what happened (*including the dates, who did what to whom, and any injuries*): _____

Continued on Attachment 5b.

6. Employee will suffer great and irreparable harm before this petition can be heard in court unless the court makes those orders requested below effective now and until the hearing. (*Specify the harm and why it will occur before the hearing*):

Continued on Attachment 6

Plaintiff/plaintiff's attorney hereby certifies the following (*Check the appropriate box*):

Oral notice of this petition has been given to the defendant.

Written notice of this petition has been given to the defendant.

Oral notice of this petition has been given to the defendant's attorney.

Written notice of this petition has been given to the defendant's attorney.

A good faith attempt was made to inform the defendant and/or the defendant's attorney of this petition. The efforts to inform consisted of (*specify*): _____

Because of the following reasons, plaintiff/plaintiff's attorney should not be required to give notice to the defendant/defendant's attorney (*specify*): _____

7. Defendant's conduct has been directed against employee and is knowing and willful, is not constitutionally protected, and does not constitute lawful acts of self-defense or defense of others.

PLAINTIFF REQUESTS THE COURT TO MAKE THE ORDERS INDICATED BY THE CHECK MARKS IN THE BOXES BELOW.

8. **RESTRAINING ORDERS** **To be ordered now and effective until the hearing**

a. **Defendant shall not engage in unlawful violence or make threats of violence against the employee and the following members of employee's family or household who reside with the employee:**

(1) **(Name):** _____

Sex: Male Female

Date of birth: _____

(2) **(Name):** _____

Sex: Male Female

Date of birth: _____

(3) **(Name):** _____

Sex: Male Female

Date of birth: _____

Continued on Attachment 8a.

b. **Specifically, defendant**

(1) shall not batter or stalk the employee and other protected persons.

(2) shall not follow or stalk the employee and other protected persons to or from the place of work.

(3) shall not follow the employee and other protected persons during hours of employment.

(4) shall not contact the employee and other protected persons, directly or indirectly, by **any** means, including but not limited to, in person, by telephone, in writing, by public or private mail, interoffice mail, by e-mail, by text message, by fax, or by other electronic means.

(5) shall not enter the workplace of the employee and other protected persons.

(6) other (*specify*): _____

9. **STAY-AWAY ORDERS** **To be ordered now and effective until the hearing.**

a. **Defendant** shall stay at least (*specify*): _____ **yards** away from the following places and persons (*the addresses of the places are optional and may be kept confidential*):

(1) Employee and other protected person identified in Paragraph 8a.

(2) Employee's residence (*address optional*): _____

(3) Employee's place of work (*address optional*): _____

(4) Employee's children's school or place of child care (*address optional*): _____

(5) Employee's vehicle (*specify*): _____

(6) Other (*specify*): _____

b. Will granting of any of the stay-away orders in Paragraph 9a deprive Defendant of access to his or her residence or place of employment?
 Yes No (*If yes, explain*): _____

10. **COSTS**
 Defendant should be ordered to pay costs as follows (*specify*): _____

11. **OTHER ORDERS** (*specify other orders you request to help carry out the orders previously requested*): _____

12. Plaintiff requests that copies of orders be given to the following law enforcement agencies:

<u>Law enforcement agency</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____

13. Plaintiff requests that time for service of the *Order to Show Cause* and accompanying papers be shortened so that they may be served no less than (*specify number*): _____ days before the date set for the hearing. I need to have the order shortening time because of the facts contained in this petition.

14. Plaintiff has asked for restraining orders against the defendant in (*specify*): _____
County, Case No. (*specify*): _____

15. Employee has asked for an order for protection against the defendant in (*specify*): _____
County, Case No. (*specify*): _____

16. **DESCRIPTION OF DEFENDANT TO BE RESTRAINED**
Sex: Male Female Ht: _____ Wt. _____
Eye color: _____ Hair color: _____ Race: _____

Age: _____ Date of birth: _____

- 17. Plaintiff requests additional relief as may be proper.
- 18. ___ Plaintiff is not required to pay a fee for filing this petition because the petition alleges that the defendant has inflicted or threatened violence against an employee of the plaintiff, or stalked the employee, or acted or spoke in any other manner that has placed the employee in reasonable fear of violence, and seeks protective or restraining orders or injunctions restraining stalking or future violence or threats of violence in an action brought under IC 34-26-6-1 *et seq.*
- 19. Plaintiff understands that if the court issues an *Order to Show Cause*, a hearing will be held on the date shown in Paragraph 2 of the *Order to Show Cause*. At that hearing, plaintiff will be prepared to present evidence supporting the petition.
- 20. Number of pages attached: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF ATTORNEY, IF ANY)

I affirm, under the penalties for perjury, that the foregoing representations are true:

- a. on the basis of my own personal knowledge.
- b. on the basis that I have been informed and believe that the facts stated are true. (*NOTE: If this petition is made solely on the basis of plaintiff's information and belief, plaintiff **must** attach affidavits by one or more persons who have personal knowledge of the facts stated.*)

Date: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PLAINTIFF)

Title of person signing: _____

ATTORNEY OR PARTY WITHOUT ATTORNEY (*Name, attorney registration number, and address*):

TELEPHONE NO.:

FAX NO.:

ATTORNEY FOR (*Name*):

CASE IDENTIFICATION INFORMATION FOR CONFIDENTIAL FORM

For use by Court, Clerk, Prosecuting Attorney, and Law Enforcement Personnel ONLY

DIVISION OF STATE COURT ADMINISTRATION

STATE OF INDIANA)
 COUNTY OF _____)

COURT: Superior, Room #: _____
 (check one) Circuit

CASE #: _____ - _____ - _____ - _____

 PETITIONER/PLAINTIFF/NEXTFRIEND/STATE OF INDIANA
 v.

DATE: _____
 mm/dd/yyyy

 RESPONDENT/DEFENDANT

 EMPLOYEE (IF WVRO)

PERSON RESTRAINED

Name:	Home: (____) _____
Home address:	Work: (____) _____
Postal address (if different from home address):	Cell: (____) _____
Sex: <input type="checkbox"/> male <input type="checkbox"/> female	Email: _____
DOB:	Location of place of business or where person is usually or often found:
Any scars or tattoos? <input type="checkbox"/> Yes <input type="checkbox"/> No	Describe nature and location of any scars or tattoos:
Race:	Eye Color:
Hair color:	Height:
	Weight:

List the name(s), age, race, and sex of any person(s) residing at the household of the protected person who are NOT PROTECTED parties. Protected parties are listed on the Confidential Form which follows. Attach an additional sheet of paper if necessary.

Name:	Age: Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Name:	Age: Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Name:	Age: Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Name:	Age: Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Name:	Age: Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Name:	Age: Race:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female

CONFIDENTIAL FORM

Note: The following information is confidential under Indiana law pursuant to Indiana Code § 5-2-9-7, and it may not be released.

PETITIONER

Home address: _____

DOB: _____

Race: _____

Sex: male female

SSN: (optional) _____

Home: (____) _____

Work: (____) _____

Fax: (____) _____

Cell: (____) _____

Email: _____

PROTECTION ORDERS ONLY:

Do you wish to receive notifications when the order is issued, served, and about to expire? Yes No

Method: Email Text Fax

Cell Phone Service Provider (if you selected Text as the notification method): _____

You must provide data in the proper fields above to match the Method of notification chosen. See Notification Information at the bottom of this form.

Postal address (if different from home address): _____

When can protected person be reached at the above numbers or any alternative numbers?

Other protected address: _____

List the cities/counties where the protected person would like a copy of the order sent:

Address from confidentiality program of Attorney General: _____

OTHER PROTECTED PARTIES

Name: _____

Age: _____

Sex: Male Female

Date of Birth: _____

Race: _____

Name: _____

Age: _____

Sex: Male Female

Date of Birth: _____

Race: _____

Name: _____

Age: _____

Sex: Male Female

Date of Birth: _____

Race: _____

Attach an additional sheet of paper if necessary to list additional protected parties.

PERSON RESTRAINED

SSN: _____

The "Confidential Form" portion of this form must be on green paper according to Admin. Rule 9

Notification Information

- The user will incur standard text-messaging fees for any messages received.
- The user is responsible to notify the Clerk's office of any changes to their contact information which may include their cell phone number and email address.
- The Indiana Supreme Court's Division of State Court Administration may not be held liable for the failure of the receipt of a notification.
- The notifications sent to users are a service being provided by the Indiana Supreme Court's Division of State Court Administration.
- Cell Phone Service Providers Supported: Alltel, AT&T, Boost, Cellular South, Centennial Wireless, Cincinnati Bell, Cricket Wireless, Metro PCS, Powertel, Qwest, Rogers, Sprint, Suncom, Telus, T-Mobile, US Cellular, Verizon Wireless, Virgin Mobile

STATE OF INDIANA) IN THE _____ COURT
) SS:
COUNTY OF _____) Case Number:
(To be supplied by Clerk when case is filed.)

(Caption)

APPEARANCE BY ATTORNEY IN CIVIL CASE

This Appearance Form must be filed on behalf of every party in a civil case.

1. The party on whose behalf this form is being filed is:
Initiating _____ Responding _____ Intervening _____ ; and

the undersigned attorney and all attorneys listed on this form now appear in this case for the following parties:

Name of party _____

Address of party (see Question # 6 below if this case involves a protection from abuse order, a workplace violence restraining order, or a no-contact order)

Telephone # of party _____

(List on a continuation page additional parties this attorney represents in this case.)

2. Attorney information for service as required by Trial Rule 5(B)(2)

Name: _____ Atty Number: _____

Address: _____

Phone: _____

FAX: _____

Email Address: _____

(List on continuation page additional attorneys appearing for above party)

3. This is a _____ case type as defined in administrative Rule 8(B)(3).

4. I will accept service by:

FAX at the above noted number: Yes _____ No _____

Email at the above noted number: Yes ____ No ____

5. This case involves child support issues. Yes ____ No ____ (If yes, supply social security numbers for all family members on a separately attached document filed as confidential information on **light green paper**. Use Form TCM-TR3.1-4.)

6. This case involves a protection from abuse order, a workplace violence restraining order, or a no – contact order. Yes ____ No ____ (If Yes, the initiating party must provide an address for the purpose of legal service but that address should not be one that exposes the whereabouts of a petitioner.) The party shall use the following address for purposes of legal service:

_____ Attorney's address
_____ The Attorney General Confidentiality program address
(contact the Attorney General at 1-800-321-1907 or e-mail address is **confidential@atg.state.in.us**).
_____ Another address (provide)

7. This case involves a petition for involuntary commitment. Yes ____ No ____

8. If Yes above, provide the following regarding the individual subject to the petition for involuntary commitment:

a. Name of the individual subject to the petition for involuntary commitment if it is not already provided in #1 above: _____

b. State of Residence of person subject to petition: _____

c. At least one of the following pieces of identifying information:

(i) Date of Birth _____

(ii) Driver's License Number _____

State where issued _____ Expiration date _____

(iii) State ID number _____

State where issued _____ Expiration date _____

(iv) FBI number _____

(v) Indiana Department of Corrections Number _____

(vi) Social Security Number is available and is being provided in an attached confidential document Yes ____ No ____

9. There are related cases: Yes ____ No ____ (If yes, list on continuation page.)

10. Additional information required by local rule:

11. There are other party members: Yes ____ No ____ *(If yes, list on continuation page.)*

12. This form has been served on all other parties and Certificate of Service is attached:
Yes ____ No ____

Attorney-at-Law
(Attorney information shown above.)

APPEARANCE FORM –CONTINUATION PAGE (Civil Case)

Case Number: _____

First Name in Case Caption: _____

Continuation of Item #1 (For Attorney use only; list additional parties this attorney represents in this case):

Name: _____

Address: _____

Name: _____

Address: _____

Continuation of Item # 2 (For Attorney use only; list additional attorneys appearing for party member, as applicable):

Name: _____ Atty. Number: _____

Address: _____ Phone: _____

_____ FAX: _____

_____ Email Address: _____

Name: _____ Atty. Number: _____

Address: _____ Phone: _____

_____ FAX: _____

_____ Email Address: _____

Continuation of Item # 9 (Caption and case number of related cases):

Caption: _____ Case Number: _____

Caption: _____ Case Number: _____

Caption: _____ Case Number: _____

Caption: _____ Case Number: _____

Continuation of Item # 11 (For Attorney use only; other party members not represented by this attorney)

Use additional continuation forms if needed.

NOT FOR PUBLIC ACCESS
IN ACCORDANCE WITH ADMINISTRATIVE RULE 9

Special Instructions: *This page must be on separate, light green paper. See bottom of page for text of Trial Rule 5(G)(2).*

STATE OF INDIANA) IN THE _____ COURT
) **SS:**
COUNTY OF _____) Case Number:

(Caption)

CIVIL APPEARANCE FORM

Item 5 (Social Security numbers of all family members in cases involving support):

Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____
Name: _____	SS # _____

Item 8 (Social Security number of person who is subject to involuntary commitment):

Name: _____ SS # _____

When only a portion of a document contains information excluded from public access pursuant to Administrative Rule 9(G)(1), said information shall be omitted [or redacted] from the filed document and set forth on a separate accompanying document on **light green paper** conspicuously marked "Not For Public Access" and clearly designating [or identifying] the caption and number of the case and the document and location within the document to which the redacted material pertains.

NOT FOR PUBLIC ACCESS

STATE OF INDIANA) IN THE _____ COURT _____
) SS: (_____ DIVISION, ROOM ____)
 COUNTY OF _____)
 _____)
 Petitioner)
 vs.) CASE NO. _____)
 _____)
 Respondent)

NOTICE TO APPEAR

The Petitioner having filed a petition for an Order for Protection, the Court now finds the conditions in Indiana Code § 34-26-5 have been met, and sets this matter for Hearing as follows:

TO: _____
 DATE OF HEARING: _____
 TIME OF HEARING: _____
 LOCATION OF HEARING: _____

Please bring all documents and witnesses relating to this case with you to Court on your hearing date.

___ THE SHERIFF OF _____ COUNTY, INDIANA, IS ORDERED to personally serve this notice upon Respondent and make due return.

DATE: _____ Recommended for approval by, if applicable:
 _____, COMMISSIONER/REFEREE

Approved and ordered by:
 _____, JUDGE/MAGISTRATE

*******IMPORTANT NOTICE*******

IF YOU DO NOT ATTEND THE HEARING IN THIS CASE, THE JUDGE MAY HEAR THE CASE IN YOUR ABSENCE AND ORDER ADDITIONAL RELIEF THAT MAY INCLUDE:

- **EVICTION/EXCLUSION FROM A RESIDENCE;**
- **RESTRICTING POSSESSION OF PERSONAL PROPERTY;**
- **RESTRICTING PARENTING TIME;**
- **AWARDING CHILD SUPPORT; AND,**
- **PROHIBITING POSSESSION OF FIREARMS, AMMUNITION, OR DEADLY WEAPONS.**

Form Administrative Rule 9-G1

STATE OF INDIANA
IN THE _____ COURT, COUNTY OF _____

_____,)
Plaintiff(s),)
) Case No: _____
vs.)
)
_____,)
Defendant(s))

**Administrative Rule 9(G)(5) Notice of Exclusion
of Confidential Information from Public Access
(FILED WITH TRIAL COURT CLERK)**

Contemporaneous with the filing of this notice, _____ has filed confidential information on green paper in accordance with Administrative Rule 9(G)(6). Pursuant to Administrative Rule 9(G)(5), _____, provides this notice that the confidential information contained on that green paper is to remain excluded from public access in accordance with the authority listed below:

<u>Name or description of document filed on green paper.</u>	<u>Administrative Rule 9(G) grounds upon which exclusion is authorized.</u>
PO-0104, Confidential Form	<ol style="list-style-type: none"> 1. Admin. R. 9 (G) (2) (g) (i) 2. Admin. R. 9 (G) (3) (b) 3. Ind. Code 5-2-9-5.5 (c) 4. Ind. Code 5-2-9-6 5. Ind. Code 5-2-9-7 6. Ind. Code 31-37-19-2 (2) 7. Ind. Code 33-39-1-8 (i) (2) 8. Ind. Code 34-26-5-3 (a) (C) 9. Ind. Code 34-26-6-13 10. Ind. Code 35-33-8-3.2 (f) (2) 11. Ind. Code 35-38-2-2.3 (f) (2)

Respectfully submitted,

[Insert Name]

CERTIFICATE OF SERVICE

I certify that on this _____ day of _____, 20_____, the foregoing was served upon the following by _____:

[list names and addresses of counsel of record]

[Signature]