IN THE SITKA TRIBE OF ALASKA
SITKA TRIBAL COURT

PETITION FOR DOMESTIC VIOLENCE PROTECTIVE ORDER (ONE PETITIONER)

Sitka Tribe of Alaska
Sitka Tribal Court
204 Siginaka Way
Sitka, Alaska 99835
(907)966-9627

_____)
Petitioner (protected person))
Date of Birth: _____)
☐ Petitioner is a youth. Who is signing for the youth?)
Name:_____ Date of Birth:_____)
Relationship to youth:_____)
V.)
_____)
Respondent (restrained person)) Tribal Case No.: _____-DV-_____
Date of Birth: _____)
☐ Respondent is a youth. Who is signing for the youth?)
Name:_____ Date of Birth:_____)
Relationship to child:_____)
_____)

1. **Type of Order.** Select the type of order being requested. *Select both the 20-day order and the long-term order if petitioner wants a protective order for more than 20 days.*

☐ **20-day protective order.** (This order, called an "ex parte" order, can take effect immediately without prior notice to the respondent.)
I understand that I can get a 20-day order without prior notice to the respondent. However, the law requires that I tell the court about any efforts I have made to notify the respondent.
Did you notify the respondent before filing this petition? ☐ yes ☐ no
Describe efforts made to notify respondent: _____

_____

_____

☐ **Long-term protective order: one (1) year**. (This order can only be issued after Notice to the respondent and a court hearing). Most provisions of this order will last for one (1) year. However, the provision that prohibits the respondent from committing domestic violence will last indefinitely (until the court terminates it). NOTE: If there is any chance you might need protection for more than 20 days, you should request both a long-term order and a 20-day order. To do this, check both boxes.

2. **How are Petitioner and Respondent Related?** (check all that apply):

☐ Married to each other now or in the past
☐ We have a child together
☐ Living together now or in the past, but not also dating or sexual relationship (roommates)

☐ Dating or sexual relationship now or in the past (but not also living together)
☐ Living together and dating or sexual relationship now or in the past
☐ Related by marriage now or in the past (such as in-laws)
☐ Other family relationship, respondent is petitioner's
☐ child or stepchild ☐ brother or sister ☐ parent
☐ stepparent ☐ grandchild ☐ grandparent
☐ first cousin ☐ uncle or aunt ☐ niece or nephew
☐ other relative (describe) _____

3. **I am a tribal citizen.** ☐ Yes Enrollment #:_____ ☐ No
4. **Is the Respondent a Tribal Citizen?** ☐ Yes Enrollment #:_____ ☐ No
5. **There are children in my household.** ☐ Yes ☐ No
   If Yes. Are any of these children enrolled or eligible to be enrolled with the Sitka Tribe of Alaska?
   ☐ Yes ☐ No
   If yes, Enrollment #(s):_____

6. **Describe the Domestic Violence.** Please be specific. Include date of incident, place where incident occurred and injuries suffered, if any. List the most recent incident first and specify whether weapons or children were involved. Attach additional sheets if necessary.

7. Has the respondent been involved in other instances of domestic violence with petitioner or anyone else? ☐ Yes ☐ No

If yes, describe.

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

8. I request an order from the court with the following protections: (check all that apply)

☒ a. Respondent not to threaten or commit acts of domestic violence, stalking or harassment.

☐ b. Respondent not to telephone, contact or otherwise communicate in any other way, directly or indirectly with me. Safe Exceptions (if any):

☐ no exceptions ☐ by e-mail to: _____

☐ through an attorney ☐ by telephone to _____

☐ through third party (family member/good friend) named: _____

☐ other: _____

☐ c. Respondent to leave and stay away from my residence. (see section 12 for assistance from law enforcement)

☐ Petitioner's residence is at (address): _____

☐ For safety, Petitioner does not want Respondent to know their residential address. (by checking this box, petitioner's address will be withheld from the copy of the petition that is served on the respondent.)

Does the respondent live in this residence too? ☐ Yes ☐ No

Does the respondent know this address? ☐ Yes ☐ No

(If yes, answer the following :)

(1) Is the residence also used for business purposes? ☐ Yes ☐ No

(2) If yes, please describe the business: _____

(3) The title or lease/rental contract is in the name of: _____

Note: The temporary possession of the residence may be given to the petitioner regardless of ownership of the residence. (STA Domestic Violence Code, Section 2.04(c).)

☐ d. Respondent to stay away from and not telephone or go to the following locations:
- ☐ Child(ren)'s School ☐ My Place of Employment
- ☐ STA Resource Protection Department (429 Katlian St., right side of Healing House)
- ☐ STA Workforce Development Department (429 Katlian St., left side of Healing (House)
- ☐ STA Social Services Department (110 American Street)
- ☐ STA Main Offices (204 Siginaka Way), except for the purposes of filing documents with the Sitka Tribal Court
- ☐ STA Language & Education Department (205 Baranof St.)
- ☐ STA Sheet'ka Kwaan Naa Kahidi Community House (200 Katlian St.)
- ☐ STA Economic Development Department (246 E Katlian St.)
- ☐ STA Tribal Tannery (4608 HPR)
- ☐ The following places frequented by me or by the member of my household listed below:

Name of Place & Address **Name of Household Member**

_____

_____

_____

☐ **Exceptions to the above restrictions:**_____

_____

☐ e. Respondent not to enter or follow or interfere with the operation of any vehicle in my possession or occupied by me.

☐ f. Respondent not to possess or use controlled substances.

☐ g. I am given temporary possession and use of the following, regardless of ownership:

(1)☐ Residence located at _____ ☐ and everything in it.

(2)☐ The following described vehicle and keys to it:

License Plate Number:_____.

Description:_____

(3)☐ Essential personal items (check all that apply):

- ☐ House Keys ☐ Garage Door Opener ☐ Children's Belongings
- ☐ Mailbox Key ☐ Clothes ☐ Medicine ☐ Children's Medicine
- ☐ Toiletries ☐ Medicare/Medicaid Coupons ☐ Food Stamps
- ☐ ANCSA ID ☐ Tribal Enrollment Card ☐ Certificate of Indian Blood
- ☐ Birth Certificate(s) Belonging to:_____
- ☐ Passport(s) Belonging to:_____
- ☐ Immigration Documents Belonging to:_____
- ☐ Pet(s) Named:_____
- ☐ Other:_____

☐ h. Respondent not to sell, dispose of, destroy or deface any regalia or at.oow (cultural objects) or personal property of the petitioner, or any property jointly held, or any disputed property.

*See section 12 to request assistance from law enforcement to obtain property granted under section 8. *

9. Long-Term Protections Requested. (In addition to the protections listed above.)
I request that the following be included in the long-term order. I understand that these requirements cannot be included in the 20-day order. (check all that apply):

☐ a. Respondent not to use or possess a deadly weapon (including a firearm).
☐ b. Respondent to surrender any firearm owned or possessed by the respondent.
☐ c. Respondent to reimburse the person(s) named below for expenses associated with the domestic violence (such as medical expenses, counseling, shelter, and repair or replacement of damaged property) as described below. Reimbursement may be in the form of money, subsistence foods or other appropriate reparations.

Pay To	**Type of Expense**	**Reparation**

☐ d. Respondent to pay to _____ the costs and fees associated with bringing this action, in the amount of $_____.
☐ e. Respondent to enroll in and complete, at respondent's expense:
  ☐ A program for the rehabilitation of perpetrators of domestic violence.
  ☐ A treatment program for the abuse of alcohol.
  ☐ A treatment program for the abuse of controlled substances.
☐ f. Withhold a portion of the benefits and services available to Respondent that are directly related to being a citizen of the Sitka Tribe of Alaska, including but not limited to educational scholarships, vocational training, and/or general assistance.
☐ g. Recommend to the STA Enrollment Committee that the Respondent be disenrolled.
☐ h. Respondent to complete community work service with any community service organization, including the Sitka Tribe of Alaska's traditional Foods program. The agency where Respondent will perform community service is_____.
☐ i. Other relief necessary to protect the safety of petitioner or any other family or household member. Please explain other protections requested: _____

_____

_____

10. Children (if petitioner is not requesting custody or child support, skip to section 11.)

☐ I request that the court enter the following orders concerning the child(ren).
a. Custody. I request the court to award me temporary physical custody of the minor child(ren) named below:
(1)

Child's Full Name	**Date of Birth**	**How Long in AK**	**My Relationship To Child**	**Respondent's Relationship To Child**

_____
_____
_____
_____
_____

(2) The child(ren) and I have lived in Alaska for the past six (6) months.
☐ Yes ☐ No
(3) There is a custody order over one or more of the children.
☐ Yes ☐ No ☐ Do not know

If yes, please provide information about each order below:

Child's Name	**State that Issued Order**	**Case Number (if known)**	**Approximate Date of Order**	**Order Grants Custody To:**

(4) I currently have the child(ren) ☐ yes ☐ no

See section 12 to request assistance from law enforcement to obtain custody granted under section 10.

b. Visitation. I understand the court may only grant visitation to the Respondent if my safety and the safety of the child(ren) can be protected. If the court considers visitation, please list a proposed visitation schedule, if any, where exchanges should take place, as well as any safety concerns: _____
_____

c. Child Support. I request that the court require the respondent to pay child support:
☐ yes ☐ no
☐ I request the matter be referred to the State of Alaska Child Support Enforcement Division for establishment of a child support order, **or**
☐ I request that the court order the respondent to pay child support to me for the child(ren) named in section 10(a)(1) during the period I have temporary physical custody of them.

(1) Financial information about Respondent
Respondent's Occupation: _____
Name of Employer: _____
Respondent's take-home pay: $ _____ ☐ weekly ☐ bi-weekly ☐ monthly
☐ Other _____

(2) Child support checks should be sent to: _____
(Mailing address safe to reveal to respondent)

11. **Other cases pending in Tribal Court or State Court.**
Please list any other court cases in either the Tribal Court or State Court involving you or the Respondent. Include information concerning the type of case (for example, divorce or child custody, or domestic violence criminal cases) and the approximate date the case was filed or resolved.

_____

_____

_____

12. Assistance From Law Enforcement. In addition to the protections listed above, I ask the court to issue and order requiring law enforcement to do the following (check all that apply):

☐ a. Accompany me to take possession of the residence identified in section 8(g)(1) above. Remove Respondent if necessary.
☐ b. Accompany and assist me to take possession of the personal items listed in section 8(g)(3) above.
☐ c. Accompany and assist me to take possession of the vehicle identified in paragraph 8(g)(2) above.
☐ d. Assist me to obtain custody of the minor child(ren) named in section 10(a)(1) above.
☐ e. Accompany Respondent, **once**, to the residence at (street address): _____
_____ to recover any **undisputed personal items, clothing and**;

_____

_____

_____.

Law Enforcement to contact petitioner to arrange date and time they will accompany Respondent to the residence. Petitioner may be present. Any item Petitioner objects to Respondent removing, law enforcement shall restrain Respondent from removing from the residence.

13. Information about Respondent.

Respondent's full legal name and any nicknames or other names used: _____

_____

Respondent's Mailing Address: _____
Respondent's Physical Address: _____
Respondent's Home Phone: _____ Cell Phone: _____
Respondent's Employer: _____ Work Phone: _____
Officer Safety Information (access to firearms or weapons, previous hostility toward law enforcement, etc.): _____

_____

14. Petitioner's Information. (The court needs to know your mailing address in order to send court papers, including notices of hearing, to you. The court needs to know you phone number in order to get ahold of you in any urgent matters pertaining to you or your order.)

☐ **Check this box if you do not have an address and/or phone number that can safely be revealed to the respondent. The Tribal Court Clerk will redact your mailing address and/or phone number from the copy to be served on the respondent to keep your information confidential and it will not be revealed to the respondent.**

My Mailing Address is: _____

My Message Phone is: _____

Do not sign until you are in front of a Court Clerk, Notary Public, or other person authorized to administer oaths.

I swear, or affirm, under penalty of perjury that all the information I provided in this petition is true and correct to the best of my knowledge and belief.

_____ _____
Date Petitioner's Signature

_____
Print Name

Subscribed and sworn to or affirmed before me at _____, Alaska on _____.
Date

_____
Tribal Court Clerk, Notary Public or Other Person
Authorized to Administer Oaths

(SEAL) My commission expires: _____