**CASE NO.**

**PETITIONER’S STATEMENT FOR PERSONAL PROTECTION ORDER**

**STATE OF MICHIGAN
30TH JUDICIAL CIRCUIT
COUNTY OF INGHAM**

**313 W KALAMAZOO ST, LANSING, MI 48933 (517) 483-6500**

Click here to enter text. **, v.** Click here to enter text.**,
PETITIONER RESPONDENT**

**Note to Petitioner: Your statement becomes part of the public court file and does not stay confidential from the Respondent.**

1. How do you know the Respondent? Click here to enter text.
2. *I state that the Respondent has engaged in the following specific stalking behaviors against me that have caused me to feel terrorized, frightened, intimidated, threatened, harassed, or molested.*

If this section does not apply, check🡪 [ ] N/A

1. Date of most recent stalking behavior: Click here to enter a date.

What happened? Click here to enter text.

1. Has this happened more than once? [ ]  NO [ ] YES

If YES, how many times and/or how frequently? Click here to enter text.

1. Provide more details of additional stalking behaviors.

Date:Click here to enter a date. What happened? Click here to enter text.

Date: Click here to enter a date. What happened? Click here to enter text.

Date: Click here to enter a date. What happened? Click here to enter text.

**Attach separate pages if you need more space.**

1. *I need a Personal Protection Order because the Respondent has done the following things that have put me in fear of further violence and/or have interfered with my freedom.*

If this section does not apply, check🡪 [ ] N/A

* 1. Date:Click here to enter a date. Location: Click here to enter text.

Was a weapon involved? [ ]  NO [ ]  YES Click here to enter text.
 Weapon type

What happened? Click here to enter text.

Were you injured during the incident? [ ] NO [ ] YES (Please describe)
Click here to enter text.

* 1. Date: Click here to enter a date. Location: Click here to enter text.

Was a weapon involved? [ ]  NO [ ]  YES Click here to enter text.
 Weapon type

What happened? Click here to enter text.

Were you injured during the incident? [ ]  NO [ ]  YES (Please describe)

Click here to enter text.

**Attach separate pages if you need more space.**

1. Have you or anyone else reported any of these incidents to the police? [ ]  NO [ ]  YES
2. Are there any criminal cases involving both you and the Respondent? [ ]  NO [ ]  YES

A. Which court and county? Click here to enter text.

B. Who is being charged with a crime? [ ]  Respondent [ ]  Petitioner

C. What are the charges? Click here to enter text.

 D. Please check which of the following applies:

 [ ]  Case pending

[ ]  Case dismissed

[ ]  Guilty finding/guilty plea

[ ]  Found not guilty

1. Are there any other prior or current PPO matters involving both you and the Respondent?

[ ]  NO [ ]  YES

Petitioner Respondent County/Case No./Judge

Click here to enter text. Click here to enter text. Click here to enter text.
 In effect? [ ]  NO [ ]  YES

Click here to enter text. Click here to enter text. Click here to enter text.
 In effect? [ ]  NO [ ]  YES

1. Do you and the Respondent have any other prior or current court cases together (e.g. divorce, custody, landlord/tenant, etc.)? [ ]  NO [ ]  YES

Case Type County/Case No./Judge

Click here to enter text. Click here to enter text.

Click here to enter text. Click here to enter text.

1. *I genuinely fear the Respondent will cause further abuse because* Click here to enter text.
2. Do you currently live with or share your residence with the Respondent?
 [ ]  No, we do not currently live/share a residence together.

[ ]  Yes, we currently live/share a residence together.

* Whose name is on the lease or mortgage? Click here to enter text.
* Who pays the rent or mortgage payment? Click here to enter text.
1. Do you want the Respondent prohibited from going to a specific address that is different from your residence? [ ]  No [ ]  Yes

Address(es) Click here to enter text.

 **\*\*Also write this address(es) on the SCAO Petition form \*\***

If yes, whose address is this and why should it be included? Click here to enter text.

1. Do you currently work at the same place as the Respondent?

[ ]  No, we do not work at the same place.

[ ]  Yes: Employer name & address: Click here to enter text.

1. Do you currently go to school at the same place as the Respondent?

[ ]  No, we do not go to school at the same place.

[ ]  Yes: School name & address: Click here to enter text.

1. Do you have any children with the Respondent? [ ]  No [ ]  Yes

Click here to enter text. Click here to enter text. Click here to enter text. Click here to enter text.

Name/age Name/age Name/age Name/age

1. Are you including additional attachments? [ ]  No [ ]  Yes Click here to enter text.
 # of additional pages
2. I state that the above statements are true to the best of my knowledge and belief.

Date:Click here to enter a date. Signature: /s/ Click here to enter text.