

INSTRUCTIONS FOR COMPLETING THE PETITION AND AFFIDAVIT FOR HARASSMENT PROTECTION ORDER.

NOTE: THE USE OF THE [INFORMATION WORKSHEET](#) FOR THE HARASSMENT PROTECTION ORDER WILL ASSIST YOU IN COMPLETING THIS FORM.

HEADING:

- a. Choose the county in the drop down box below the first blank. This is where you are filing this petition and affidavit.
- b. Enter the first, middle and last names of the petitioner (your name).
- c. Enter the first, middle and last names of the additional petitioner(s) or minor children who are to be covered by THIS petition and affidavit.
 - i. PLEASE NOTE: Some courts require a separate petition for each person seeking protection. Check with the court in which you will be filing the request.
- d. Enter the first, middle and last names of the respondent (the other party's name).
- e. The case number will be assigned by the clerk of the district court.

IN THE DISTRICT COURT OF a. COUNTY, NEBRASKA

Choose the county e.

b. _____
Petitioner.

c. _____
Additional Petitioner/Minor Child(ren).

i. _____
Additional Petitioner/Minor Child(ren).

d. _____
Respondent.

**PETITION AND AFFIDAVIT TO
OBTAIN HARASSMENT
PROTECTION ORDER**

BODY OF PETITION AND AFFIDAVIT:

The numbers below give instructions for completing the paragraphs with the same numbers in the Petition and Affidavit.

Paragraph 1. a. Enter your full name in the first paragraph.

- b. Check the box that represents your role in this case.
 - i. If you check the first box, the request is for protection just for yourself.
 - ii. If you check the second box you are asking for protection for you **AND** the “additional petitioners/minor children” who are listed in the heading and are also afraid of harassment.
 - iii. If you check the third box, the protection requested is only for “additional petitioners/minor children” listed in the heading, **BUT** not for yourself.
 - iv. **ONLY** If you check either the second or the third box, you will **also** check the box that represents your relationship to the additional petitioner(s) and/or minor child(ren).
- c. Check the box that is correct for if you are 19 or older or legally emancipated or if you are a minor.
 - i. **IF YOU ARE A MINOR** – enter your age in the box provided.
- d. Check the next box if you do NOT speak English.
 - i. If you check the box, enter the language that you speak.

1. I, a. _____, am the petitioner in this case. I am petitioning for a harassment protection order pursuant to Neb. Rev. Stat. § 28-311.09.

I am filing this petition on behalf of:

b. Myself. I have been harassed.

Myself and additional petitioner(s) who have been harassed and whose name(s) is/are shown after mine in the caption of this petition. My relationship to the additional petitioner(s)/minor child(ren) is/are: custodial parent, guardian, other: _____

iv. Only on behalf of the additional petitioner(s) who have been harassed and whose name(s) is/are shown after mine in the caption of this petition. My relationship to the additional petitioner(s)/minor child(ren) is/are: custodial parent, guardian, other: _____

AND:

c. I am 19 or older or legally emancipated OR I am a minor and i. _____ years of age.

d. I do not speak English. The language that I speak is: i. _____

- Paragraph 2. e. Check the box for either: you have received address protection, you are living at a safe house, or that you are providing your address.
- i. If you check the third option, enter your street address in the space provided.
 - ii. If your mailing address is different from your street address enter what your mailing address is.

2. Check Only One:

I have received address protection from the Secretary of State under the Address Confidentiality Program. (Service of any court process shall be made by mailing two copies of the process to the Office of Secretary of State, Address Confidentiality Program, Suite 2300, State Capitol Building, Lincoln, NE, 68509)

I am living at a safe house or shelter for my own protection. Pursuant to Neb. Rev. Stat. §29-4303, I cannot identify the name, address, location or phone number of the facility.

My address is:

(Street or Route/Box) (City) (State) (ZIP code)

Mailing address (if different):

(Street or Route/Box) (City) (State) (ZIP code)

- Paragraph 3. f. Check the correct box of Paragraph 3.
- i. If you check the box that you agree to receive emails, enter your email address.

3. f. I do not agree to receive notification by e-mail.

I agree to receive notification by e-mail. i.

e-mail address: _____

- Paragraph 4. g. Enter the age of the respondent.
- h. Enter the respondent's street address.
- i. If the respondent's mailing address is different from their street address, enter the mailing address.
- i. Enter the respondents telephone number.
- j. Check the next box if the respondent does NOT speak English.
- i. If you check the box, enter the language that they speak.
- k. Enter your relationship to the respondent (if any).

4. I am filing this petition against the respondent whose age is: 9. and who resides at:

h. _____

(Street or Route/Box) (City) (State) (ZIP code)

Mailing address (if different):

i. _____

(Street or Route/Box) (City) (State) (ZIP code)

i. _____

(Phone number)

j. The respondent does not speak English. The language that the respondent speaks is: i.

k. My relationship to the respondent is: _____

- Paragraph 6. l. Check the appropriate box.
- i. IF you AND the respondent HAVE been involved in a past or current court case together, enter the name of the court, the case number, the type of case and the date of the determination.

6. l. To my knowledge, The respondent and I have or have not been involved in past or current court cases together. (i.e., divorce, paternity, custody, juvenile, criminal or protection orders) If so: when, where, type of case, name of court(s), and case number(s).

i. _____

- Paragraph 7. Check all the boxes that apply for the types of protection you are requesting.

7. I hereby ask the court to enter a protection order (mark all that apply):

prohibiting the respondent from imposing any restraint upon the person(s) seeking protection.

prohibiting the respondent from harassing, threatening, assaulting, molesting, attacking, or otherwise disturbing the peace of the person(s) seeking protection.

prohibiting the respondent from telephoning, contacting, or otherwise communicating with the person(s) seeking protection.

- Paragraph 8. Check the appropriate box.

8. Pursuant to Neb. Rev. Stat. § 25-2740, I request to have a District Court Judge, or a County Court Judge preside over this proceeding. (I understand this request may not be granted.).

Paragraph 9. Write a brief, but detailed description of the MOST RECENT and the MOST SEVERE series of acts of harassment toward the person(s) seeking protection.

9. The dates or approximate dates and facts of the most recent series of acts and the most severe incident or incident(s) of harassment toward the person(s) seeking protection are (Please write a brief but detailed description.):

A. Date/Time: _____ Description: _____

Paragraph 11. Enter the information for EACH of the additional petitioner(s)/minor child(ren).

This information includes:

- i. Their full name;
- ii. Their age;
- iii. Their relationship to the respondent (this a drop down list if this form is being completed on line);
- iv. Check box if their address is the same as your address; or
- v. Check box and available space if their address is different from your address.

11. Additional Petitioner(s) (if needed):

Petitioner 2 (Minor Child):

Name: _____ Age: _____ Relationship to the Respondent: _____

i. _____ ii. _____ iii. _____

Residence:

The address of this Petitioner is the same as my address above.

This Petitioner's address is: _____

(Street or Route/Box) (City) (State) (ZIP code)

SIGNATURE BLOCK:

DO NOT SIGN THIS COMPLAINT UNTIL YOU ARE PRESENT IN FRONT OF A NOTARY OR THE CLERK OF THE DISTRICT COURT.

NOTARY VERIFICATION STATEMENT:

THIS WILL BE COMPLETED BY THE CLERK OF THE DISTRICT COURT OR BY A NOTARY