

GENERAL INSTRUCTIONS  
FOR THOSE SEEKING A PROTECTION FROM STALKING ORDER

**NOTICE**

**The protection from stalking process is designed to provide quick and immediate protection. However, the process may require time, expertise, or more than one hearing. If you have questions, you should seek help from an attorney or victim services advocate. The Kansas Crisis Hotline (1-888-363-2287) or Kansas Legal Services (1-800-723-6953) may be able to help you find an attorney or advocate.**

**These are basic forms and they do not cover every situation. The Clerk of the District Court cannot help you with these forms. The clerk cannot give legal advice to you or tell you about your rights or responsibilities. The clerk can only provide very limited information about the protection order process. You can find more information about protection from stalking at <http://www.kcsdv.org/pfs.html>.**

1. You may seek a protection from stalking order:
  - a. For yourself; or,
  - b. For your minor child; or,
  - c. For a minor child who resides with you.

2. Stalking must have occurred against each person for whom protection is sought.

“Stalking” is an intentional harassment of another person that places the other person in reasonable fear for that person’s safety.

“Harassment” is a knowing and intentional course of conduct directed at a specific person that seriously alarms, annoys, torments or terrorizes the person and that serves no legitimate purpose.

“Course of conduct” is conduct consisting of two or more separate acts over a period of time, however short, that show a continuity of purpose which would cause a reasonable person to suffer substantial emotional distress.

3. You may file a Petition for Protection from Stalking Order in any district court. In addition, you must complete the Protection from Stalking Confidential Address Form and include it with your petition.
4. You must notify the defendant by personal service that you have filed a Petition for a Protection from Stalking Order. To obtain personal service, you must fill out a Request for Service form, requesting that the sheriff deliver the Petition for Protection from Stalking to the defendant.
5. If the defendant is a minor, you must complete the Minor Defendant Addendum. Petitions, motions and temporary protection from stalking orders filed against a minor defendant must be served by serving the minor **and**:
  - a. The minor’s guardian or conservator, if any; **or**,
  - b. The minor's father or mother; **or**,
  - c. A person having the minor's care or control; **or**,

d. A person with whom the minor resides.

If service cannot be made upon any of these people, then service may be obtained as provided by order of the judge.

6. You should be available to testify at future hearings as set by the judge. If you fail to appear, the case may be dismissed.
7. A Final Protection from Stalking Order will expire after one year or on the date stated in the order, unless you request an extension or modification from the court. You may request that the court extend an order for one additional year, or longer under certain circumstances. If the defendant has violated a valid protection order or been convicted of a person felony against you or a member of your household, you may request the court extend the order for at least two years or up to the lifetime of the defendant. A request to extend an order for more than one year must be personally served on the defendant and the court must hold a hearing where the defendant may appear, present evidence, and question witnesses.

IN THE DISTRICT COURT OF DOUGLAS COUNTY, KANSAS

\_\_\_\_\_, Plaintiff

vs.

Case No. \_\_\_\_\_

\_\_\_\_\_, Defendant

**PROTECTION FROM STALKING CONFIDENTIAL ADDRESS FORM**

(K.S.A. 60-31a04(e))

NOTE: THIS FORM WILL BE SHOWN ONLY TO AUTHORIZED COURT OR LAW ENFORCEMENT PERSONNEL. THIS FORM WILL NOT BE DISCLOSED TO THE PUBLIC OR TO THE DEFENDANT. IT IS THE PLAINTIFF'S RESPONSIBILITY TO NOTIFY THE COURT OF ANY CHANGE IN ADDRESS OR TELEPHONE NUMBER.

Name of Plaintiff: \_\_\_\_\_

Confidential Address:

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

\_\_\_\_\_  
Plaintiff

vs.

Case No. \_\_\_\_\_

Div. No. \_\_\_\_\_

\_\_\_\_\_  
Defendant

**PERSONAL AND SERVICE DATA SHEET**

The purpose of this sheet is to provide the Sheriff's Department with the necessary information to effect service on Defendant and to provide essential information for the safety of the Sheriff's Deputy. Information about Defendant is voluntary on the part of the Plaintiff, except physical description and information. In addition, this page establishes a contact number for returning keys to the residence, re-entering the house, or obtaining custody of any children involved. This page is for the Court and Sheriff's use only and will not be part of the packet served to Defendant. **PRINT CLEARLY.**

**PLAINTIFF'S INFORMATION (YOU)**

Plaintiff's Name: \_\_\_\_\_

Plaintiff's Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number where Plaintiff can be contacted: \_\_\_\_\_

Does Defendant have keys to your current residence? \_\_\_\_\_

Do you want your address kept confidential so Defendant cannot obtain this information? \_\_\_\_\_

Physical Description of **PLAINTIFF (You)**:

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_

**DEFENDANT'S INFORMATION**

Defendant's Name: \_\_\_\_\_

Other name(s) Defendant may go by/be known as: \_\_\_\_\_

Defendant's Social Security Number (if known): \_\_\_\_\_

Name of Defendant's Employer: \_\_\_\_\_

Defendant's Work Hours: \_\_\_\_\_

Does Defendant Operate a Business from his/her Home? \_\_\_\_\_

Does Defendant require a language interpreter? \_\_\_ Yes \_\_\_ No

If so, what language? \_\_\_\_\_

Physical Description of **Defendant**: (Please attach current photo if available)

Race: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair Color/Length: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Glasses? \_\_\_\_\_ Other Identifying Characteristics (i.e. scars, tattoos, etc.) \_\_\_\_\_

Description of Defendant's Vehicle: \_\_\_\_\_

Places Defendant is likely to be found: \_\_\_\_\_

Has Defendant been arrested? \_\_\_\_\_

If so, why? \_\_\_\_\_

Does Defendant own any weapons? \_\_\_\_\_

If so, what kinds? \_\_\_\_\_

Does Defendant have a history of drug or alcohol abuse? \_\_\_\_\_

If so, please explain: \_\_\_\_\_

Does Defendant have a history of domestic violence? \_\_\_\_\_

If so, please explain: \_\_\_\_\_

Does Defendant have a history of mental illness? \_\_\_\_\_

If so, please explain: \_\_\_\_\_

The defendant can be found at: (give all available addresses)

HOME:

Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone number \_\_\_\_\_  
Times when defendant is usually there \_\_\_\_\_

WORK:

Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone number \_\_\_\_\_  
Times when defendant is usually there \_\_\_\_\_

OTHER:

Please explain \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone number \_\_\_\_\_  
Times when defendant is usually there \_\_\_\_\_

IN THE DISTRICT COURT OF DOUGLAS COUNTY, KANSAS

\_\_\_\_\_,  
Plaintiff

vs.

Case No. \_\_\_\_\_

\_\_\_\_\_,  
Defendant

**PETITION FOR PROTECTION FROM STALKING ORDER**

(K.S.A. 60-31a01 *et seq.*)

1. Plaintiff seeks an order for protection from stalking for:
  - myself; or
  - my minor child (under age 18); or
  - a minor child who lives with me.
2. The minor child for whom Plaintiff seeks protection is: (give full name and year of birth)

NAME

YOB

\_\_\_\_\_

3. Defendant, \_\_\_\_\_ (name), can be served at:  
(please provide all available addresses)

HOME: street \_\_\_\_\_ city \_\_\_\_\_  
 state \_\_\_\_\_ zip code \_\_\_\_\_ phone number \_\_\_\_\_  
 times when defendant is usually there \_\_\_\_\_

WORK: street \_\_\_\_\_ city \_\_\_\_\_  
 state \_\_\_\_\_ zip code \_\_\_\_\_ phone number \_\_\_\_\_  
 times when defendant is usually there \_\_\_\_\_

OTHER: street \_\_\_\_\_ city \_\_\_\_\_  
 state \_\_\_\_\_ zip code \_\_\_\_\_ phone number \_\_\_\_\_  
 times when defendant is usually there \_\_\_\_\_

4. If the defendant is known to be a minor, a Minor Defendant Addendum is attached.

5. Describe the incidents of stalking. Include specific facts, dates and locations:

Incident #1: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Incident #2: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Incident(s), if any:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach additional pages as needed.)

6. Plaintiff needs a protection from stalking order because: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Plaintiff requests that the court issue an ex parte Temporary Order of Protection and Final Order of Protection restraining defendant from:

following, harassing, telephoning, contacting or otherwise communicating with the protected person

abusing, molesting or interfering with the privacy or rights of the protected person

entering or coming on or around the premises or the residence of the protected person located at: \_\_\_\_\_,

and the workplace located at: \_\_\_\_\_.

(Give address or other description of residence and workplace from which Defendant is to be excluded. DO NOT include the residential address if it is to remain confidential.)

8. The court should give copies of orders to the appropriate law enforcement agencies; set a date, time and hearing on this matter; and issue summons to Defendant, notifying Defendant of this action and the relief requested.

9. After a hearing, the court should issue a Final Order of Protection from Stalking prohibiting Defendant from committing any acts of stalking against the protected person; order Defendant to pay court costs and attorney fees if appropriate; and order any other relief necessary for the safety of the protected person including:

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**VERIFICATION**

I verify under penalty of perjury under the laws of the state of Kansas that the foregoing is true and correct. Executed on \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
*Plaintiff's Signature*

Plaintiff's Name: \_\_\_\_\_

***(Plaintiff's address is to remain confidential. DO NOT include the residential address of the Plaintiff in this petition. Plaintiff must complete the Protection from Stalking Confidential Address form and include it with this petition.)***

\_\_\_\_\_  
Attorney representing Plaintiff (if any)

Attorney's Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

SUBSCRIBED AND SWORN to before me, a Notary Public, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
*Notary Public*

My Appointment Expires: \_\_\_\_\_

MINOR DEFENDANT ADDENDUM

Case Number: \_\_\_\_\_

If the defendant is a minor, please provide the following information:

Age of Defendant: \_\_\_\_\_

Parent(s) or guardian(s) can be served at: (please provide all available addresses)

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Defendant can be served at: (please provide all available addresses)

Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

ATTACH THIS FORM TO PETITIONS, MOTIONS AND TEMPORARY PROTECTION ORDERS.